

Business Customer Information Form and Client Account Agreement**Business Name:** _____ **Phone #:** _____**Address** _____ **Fax #:** _____**Country of Registration:** _____ **Beno ID/TRN:** _____**Web Address:** _____ **Email Address:** _____**Business Structure:** Corporation Association Partnership Proprietorship Club**Date of Incorporation/Registration:** (DD/MM/YYYY) ____/____/____ **Expiry Date:** (DD/MM/YYYY) ____/____/____**Company's Primary Business Activity:** _____**Group / Corporate Structure:** _____
_____**Major Suppliers:** _____**Name(s) of the principal officer(s) or representatives of the non incorporated entity: (1)** _____

(2) _____ (3) _____ (4) _____

Name of Primary Banker: _____ **Branch:** _____**Name of Company Lawyer:** _____**Address of Company Lawyer:** _____**Name of Company Auditor:** _____**Address of Company Auditor:** _____**Purpose of the Account:** _____**Initial Deposit:** _____ **Source of Funds:** _____**Expected Monthly Level of Activity:** _____**Will this account be used to conduct business on behalf of someone other than the named accountholder(s)?** YES NO**If yes, provide details:** _____**My portfolio manager has the right to manage my funds and securities in the following manner:** "Full Discretion" (I grant my fund manager full authority over my funds and securities, without consultation). "Partial Discretion" (I must be contacted before execution of any trade/transaction). "Custody" (No discretion to trade. Assets are for safe-keeping and reporting only)**Risk Profile:** Very Cautious - no unnecessary risks Cautious - small risks acceptable Moderate - reasonable levels of risks Adventurous - accept greater levels of risk Speculative - accept high levels of risk**Investment Instrument(s):** CMA GSF REPO TFI Stockbrokerage Securities Trading**Interest instructions:** _____ **Mailing instructions:** Mail Hold**Special Instructions:** _____

AUTHORIZED SIGNATORIES :

NAME	TITLE	SIGNATURE	TRN	LIMITS (if applicable)

TERMS & CONDITIONS:

- I/We the undersigned, being the person(s) specified in the Schedule below (hereinafter, together jointly and severally if more than one, referred to as "the client") hereby request Scotia DBG Investments Limited of # 7 Holborn Road, Kingston 10, Jamaica, a company duly incorporated under the laws of Jamaica (hereinafter referred to as "the Company") to open one or more account(s) from time to time in my/our name(s) with respect to instruments issued to me/us by and/or investments held by me/us through the Company, and all accruals, payments and transactions relating thereto.
- I/We acknowledge and agree that the Company's General Terms and Conditions attached hereto, as varied by the Company from time to time - (i) are accepted by and are binding on me/us, (ii) shall govern the said account(s) and all instruments issued to me/us by and/or investments held by me/us through the Company, and all accruals, payments and transactions relating thereto, and (iii) are hereby incorporated by reference into all contracts from time to time existing between me/us and the Company (save to the extent, and to the extent only, that the Company in writing expressly agrees otherwise). I/We hereby agree to abide by and comply with the provisions set forth in the said General Terms and Conditions attached hereto, as varied by the Company from time to time. I/We hereby acknowledge having received a copy of this Client Account Agreement and the said General Terms and Conditions.

Chairman

Secretary

FOR USE BY SCOTIADBG PERSONNEL ONLY

CIF completed & signed	ID & TRN of signatories & 2 directors	Fax/E-mail/General indemnity	Deed of partnership/Internal rules
Certif. of Incorp. Articles & Memo. of Assoc.	Nature of biz (statement/print out) & Last annual return	Withholding application (If applies)	Decision in writing/ resolution of the non incorporated entity
TRN of the entity, Source of funds, purpose of the a/c	Annual reports/ audited financials (etc) for listed companies	Prof. Intermediary letter	Mailing/interest instructions
Directors' Resolution	Certif. of Good standing (overseas)	Certif. of biz. name registration /proof of registration/existence	Is the entity or any of its members related/connected to a PEP? (Y/N)

OFFICER'S NAME: _____ **SIGNATURE:** _____

SENIOR MANAGER'S NAME: _____ **SIGNATURE:** _____

COMMENTS: _____