



# INDIVIDUAL ACCOUNT APPLICATION FORM

CFH CLEARING LIMITED · V0513

## INDIVIDUAL ACCOUNT · GUIDELINES

### INTRODUCTION

The Application Form ("Form") is required to be fully completed in order to open an individual trading account with CFH Clearing Limited ("CFH Clearing"). Please therefore ensure that the following is in order:

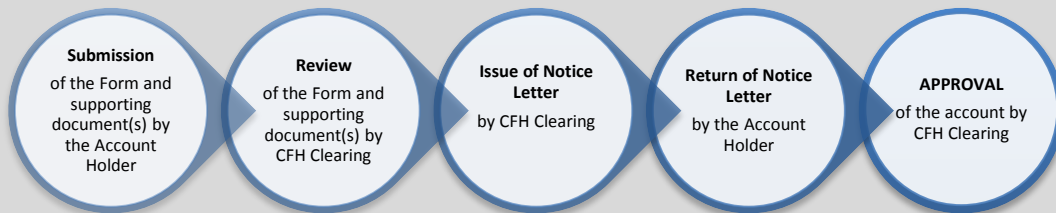
- > All fields of the Form are duly completed and page 8 is signed by you;
- > All pages of the Form are initialised by you;
- > The Limited Power of Attorney on page 7 is completed and signed by you (if applicable); and
- > All documentation listed on page 3 of these guidelines is provided together with the Form (as applicable).

### CONTENT IN THIS FORM

- > Guidelines and checklists (pages 2-3)
- > Application Form (pages 4-6)
- > Power of Attorney to a Fund Manager (only applicable to managed funds accounts) (page 7)
- > Signatures and consent (page 8)
- > Guidelines to certification of documents (page 9)
- > Certification template (page 10)

### APPLICATION PROGRESS

When applying for an individual account with CFH Clearing your Form will be reviewed together with the provided documents (a full list of the required documents is provided on page 3 of these guidelines). Please therefore ensure when submitting the Form that you have also provided all the requested documents to enable us to assess your application in a timely manner and revert back to you in due course.



### FAST PROCESSING OF THE FORM

For fast processing of the form, please return the duly completed form and all supporting documentation (please refer to page 3 of these guidelines for further information) directly to CFH Clearing by either:

#### Email

Scan the Form and all relevant documentation and email it to [cfhlegal@cfhclearing.com](mailto:cfhlegal@cfhclearing.com).

#### Fax

Fax a copy of the Form and all relevant documentation to +44 (0) 207 127 4353.

**Please note that in the event you submit your application by email or fax, you are required to submit the original Form and documents within seven (7) days of submitting the Form by standard mail or courier (as applicable to meet the timeframe).**

### RETURN OF THE ORIGINAL DOCUMENTS

It is a requirement by CFH Clearing that all of the below listed documents are returned to CFH Clearing in original to the below listed address within seven (7) days from submitting the Form. Failing to do so may result in the account with CFH Clearing to be terminated.

#### DOCUMENTS TO BE RETURNED IN ORIGINAL

- > Certified photo ID(s) and proof of residency(ies)
- > Application Form
- > Compliance Letter (if applicable)
- > Language Letter (if applicable)

#### RETURN ADDRESS

Redhavnsvej 3  
2100 Copenhagen  
Denmark

Attn.: Legal & Onboarding

#### DATE AND INITIALS OF THE ACCOUNT HOLDER

Date	Initials
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#### CFH CLEARING LIMITED

Warwick House, 25 Buckingham Palace Road · SW1W 0PP · London · United Kingdom  
P: +44 (0) 203 384 5703 · F: +44 (0) 207 127 4353 · E: [info@cfhclearing.com](mailto:info@cfhclearing.com) · W: [www.cfhclearing.com](http://www.cfhclearing.com)

Registered in England and Wales, No. 6557752  
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# INDIVIDUAL ACCOUNT · GUIDELINES

## CHECKLIST

Individual Account · Standard	Individual Account · Managed account
<input type="checkbox"/> Duly completed form <input type="checkbox"/> Certified photo ID <input type="checkbox"/> Certified proof of residency	<input type="checkbox"/> Duly completed form <input type="checkbox"/> Duly completed Power of Attorney (page 7) <input type="checkbox"/> Certified photo ID <input type="checkbox"/> Certified proof of residency
<input type="checkbox"/> License (where applicable) to operate the account with CFH Markets in accordance with the contemplated agreement	

## TERMINOLOGY IN THE FORM

<b>Certification of documents</b>	<i>In order to verify the true copy of the photo ID and proof of residency, it is a requirement by CFH Clearing that all copies of the documents are produced as a certified copy if not the original (see Certification Guidelines attached to this Form).</i>
<b>Compliance Letter</b>	<i>In the event the activity which you are to conduct with CFH Clearing is considered to be regulated by our financial services regulator but not by the financial services regulator which you are to conduct your business activity under, we may request a Compliance Letter from you to confirm the same.</i>
<b>Fund Manager</b>	<i>An individual authorised by you and approved by CFH Clearing to trade your funds on your behalf. Please carefully read the Power of Attorney on page 7 in this regards.</i>
<b>Language Letter</b>	<i>In the event the identification documents are in a language different than the English, a Language Letter can be provided on request for translation of the documents. The Language Letter can be completed by any individual(s) also qualifying to certify documents (see Certification Guidelines attached to this Form).</i>
<b>License</b>	<i>In the event you are applying to become a Fund Manager, Introducing Broker and/ or a Business Partner with CFH Clearing, a license issued by the applicable Financial Services Authority may be required and should be forwarded together with this Form.</i>
<b>Limited Power of Attorney</b>	<i>The Limited Power of Attorney is the agreement authorising your Fund Manager to trade your funds on your behalf. The Limited Power of Attorney is also referred to as the "POA" and sets out the parameters under which the Fund Manager is authorised to act on your behalf.</i>
<b>Photo ID</b>	<p><i>A valid government issued identification document ("ID") such as passport, drivers' license and national ID with photo. Please ensure the following requirements are met:</i></p> <ul style="list-style-type: none"> <li>&gt; <i>The photo ID is not expired;</i></li> <li>&gt; <i>The photo clearly displays the individual in question;</i></li> <li>&gt; <i>The signature is clear and readable; and</i></li> <li>&gt; <i>The full name and birthdate is printed on the photo ID.</i></li> </ul>
<b>Proof of residency</b>	<p><i>A document confirming the residency of the individual in question. This can be provided with either of the following documents issued within the past three (3) months:</i></p> <ul style="list-style-type: none"> <li>&gt; <i>Utility bill (e.g. gas, water, electricity, land line phone, oil, internet or cable TV connections);</i></li> <li>&gt; <i>Bank statement; or</i></li> <li>&gt; <i>National ID with address (if not provided as a photo ID).</i></li> </ul>
<b>Politically Exposed Person ("PEP")</b>	<p><i><b>Standard definition:</b> An individual who are or have been entrusted with prominent public functions including: heads of state, heads of governments, ministers and deputy assistant ministers; members of parliament; members of supreme courts, of constitutional courts or of other high level judicial bodies whose decisions are not subject to further appeal except in exceptional circumstances; members of courts of auditors or of the boards of central banks; ambassadors, chargés d'affaires and high-ranking officers in the armed forces; and members of the administrative, management or supervisory bodies of State-owned enterprises.</i></p> <p><i><b>Immediate family:</b> PEP also includes immediate family members of PEPs such as the spouse; any partner considered by national law as equivalent to the spouse; the children and their spouses or partners; and the parents.</i></p> <p><i><b>Beneficial Owners:</b> PEP also includes individuals known to be close associates of PEPs in the standard definition, which means any individual who is known to have joint beneficial ownership of legal entities or legal arrangements, or any other close business relations with a person referred to in the PEP definition; and any individual who has sole beneficial ownership of a legal entity or legal arrangement which is known to have been setup up for the benefit de facto of the PEP standard definition.</i></p>

### DATE AND INITIALS OF THE ACCOUNT HOLDER

Date	Initials

**INDIVIDUAL ACCOUNT · APPLICATION FORM**
**PERSONAL INFORMATION**

Please ensure that all information provided in this section of the Form are as highlighted in your personal identification papers. The below listed individual will hereafter be referred to as the "Account Holder".

**Name and Salutation**

Salutation  
 Mr.  Mrs.  Ms.  Dr.

First name(s)

Last name(s)

Occupation

**Contact Information**

Main phone number (incl. country code)

Secondary phone number (incl. country code)

Primary email

Secondary email

**Registered Address**

Street and number

Zip/ Post code

City

Country

**Postal Address (if different from registered)**

Street and number

Zip/ Post code

City

Country

Are you considered a Politically Exposed Person

Yes  No

**ACCOUNT INFORMATION**
**Account Type**

Individual Account

Business Partner Account

Introducing Broker Account

Fund Manager Account

**Previous Account with CFH Clearing**

Please complete the below in the event you have/ had an account with CFH Clearing.

Account type

Account number (if applicable)

Additional information (if applicable)

**REFERENCE (IF APPLICABLE)**

Please complete this section of the Form in the event you have been introduced to CFH Clearing by a third party. Please ensure to provide the full name of the third party introducer.

<input type="checkbox"/> Business Partner Account	Name of Business Partner
<input type="checkbox"/> Introducing Broker Account	Name of Introducing Broker
<input type="checkbox"/> Fund Manager Account	Name of Fund Manager

**DATE AND INITIALS OF THE ACCOUNT HOLDER**

Date	Initials

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# INDIVIDUAL ACCOUNT · APPLICATION FORM

## TRADING EXPERIENCE

*Do you have previous investment and trading experience in foreign exchange or any other margined traded instrument?*

Foreign exchange or any other margined traded instrument:

- Yes - please complete the below sections  
 No

Contract for Difference (CFDs):

- Yes - please complete the below sections  
 No

**Only to be completed if "Yes" was selected in the above section.**

*Have you been employed, or are you currently employed, in a professional position in the financial sector in an area which requires knowledge of the transactions envisaged with CFH Clearing?*

- No  
 Yes, for months - please specify  
 .....  
 Yes, for years - please specify  
 .....

*How many years have you been trading in the financial markets?*

- |   |  |
|---|--|
| <input type="checkbox"/> Less than 1 year | <input type="checkbox"/> 1 to 3 years      |
| <input type="checkbox"/> 3 to 5 years     | <input type="checkbox"/> More than 5 years |

*Which product(s) have you been trading?*

- |  |                                   |
|--|-----------------------------------|
| <input type="checkbox"/> CFD's                         | <input type="checkbox"/> Equities |
| <input type="checkbox"/> Futures/Commodities           | <input type="checkbox"/> FX       |
| <input type="checkbox"/> Other - please specify: ..... |                                   |

*How many quarterly transactions of significant size have you carried out on average for the past twelve (12) months?*

- |   |                                   |                                       |
|---|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Less than 1 year | <input type="checkbox"/> 10 to 20 | <input type="checkbox"/> More than 20 |
|---|-----------------------------------|---------------------------------------|

*What is the investment profile of the Account Holder?*

- Capital preservation/hedging (minimise the potential loss for any principal)  
 Growth (increase investment value over time whilst accepting fluctuations)  
 Speculation (assume the highest degree of risk for potentially highly returns)

*What is the size of your current financial instrument portfolio, incl. cash deposits (in EUR)?*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Below 500,000 | <input type="checkbox"/> 500,000 to 1,000,000 | <input type="checkbox"/> More than 1,000,000 |
|--|---|--|

## License(s)

*Are you authorised, regulated and/or licensed by a Financial Services Authority?*

- No  
 Yes - please specify in the right column

Name of Financial Services Authority
License/ Identification No.

### DATE AND INITIALS OF THE ACCOUNT HOLDER

Date	Initials

## INDIVIDUAL ACCOUNT · APPLICATION FORM

### SOURCE OF WEALTH

Please specify the source of wealth to be deposited with CFH Clearing by the Account Holder

<input type="checkbox"/> No funds will be deposited by the account holder	<input type="checkbox"/> Maturity or surrender of life policy	<input type="checkbox"/> Savings from salary
<input type="checkbox"/> Court award/litigation settlement	<input type="checkbox"/> Personal injuries award	<input type="checkbox"/> Other - please specify:
<input type="checkbox"/> Employer paying premium/bonus/redundancy payment	<input type="checkbox"/> Sale of investment/liquidation of investment portfolio	
<input type="checkbox"/> Inheritance/Gift	<input type="checkbox"/> Sale of property	

**In the event your account is being managed by a Fund Manager please proceed with carefully reading the Limited Power of Attorney on the following page. In the event you do not assign a Fund Manager to trade on your behalf, please continue the Form on page 8.**

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**INDIVIDUAL ACCOUNT · LIMITED POWER OF ATTORNEY**

**LIMITED POWER OF ATTORNEY TO FUND MANAGER**

**IMPORTANT INFORMATION**

*This Limited Power of Attorney ("POA") is only applicable where you assign a Fund Manager to trade on your trading account with CFH Clearing on your behalf. The POA sets out the parameters under which the Fund Manager is authorised to trade on your behalf, so please ensure to take the time to carefully read and understand the content of the POA.*

*It is a requirement for CFH Clearing that the Fund Manager you assign to trade on your behalf is already approved as a Fund Manager with CFH Clearing.*

**In the event you will not assign a Fund Manager to trade on your behalf, please disregard the below and continue to page 8 of the Form.**

**DESIGNATED FUND MANAGER**

*The Account Holder hereby designates and authorises the below listed individual/ company as to trade on behalf of the Account Holder under the terms listed in this POA.*

Full name of designated Fund Manager ("Fund Manager")

**AUTHORISATION**

The undersigned Account Holder hereby authorises Fund Manager as Account Holder's agent and attorney-in-fact, and revokes all prior powers of attorney relating to Account Holder's foreign exchange currency trading account at CFH Clearing, with full power of authority to purchase, sell or trade in over the counter foreign currency transactions, including non-deliverable transactions, on margin or otherwise, in one or more accounts (collectively, the "Accounts") opened by and maintained with CFH Clearing in the Account Holder's name and on the Account Holder's behalf. Fund Manager is authorised to act on behalf of the Account Holder in the same manner and with the same force and effect as the Account Holder might or could act in respect to such transactions, as well as with respect to all other things necessary or incidental to the furtherance and/ or conduct of the Accounts.

CFH Clearing is hereby authorised to follow instructions of Fund Manager in all such foreign currency transactions communicated through entry on CFH Clearing's trading system ("CFH Online Facility") or such other written or oral instructions that CFH Clearing may accept as well as management decisions relating to the Account. CFH Clearing will have no liability for following the instructions of Fund Manager, including but not limited to any instruction to aggregate orders of Account Holder with orders for or on behalf of Fund Manager's other clients, and Account Holder will not attempt to hold CFH Clearing liable for Fund Manager's actions or inactions.

**EXCLUSIONS, LIMITATIONS AND INDEMNITY**

Account Holder understands that CFH Clearing does not, by implication or otherwise, endorse the operating methods of such Fund Manager. Account Holder hereby releases CFH Clearing from any and all liability to Account Holder or to anyone claiming through Account Holder with respect to any damages, losses or loss of profits sustained or alleged to have been sustained as a result of CFH Clearing following Fund Manager's instructions or for any matter arising out of the relationship between the Fund Manager and Account Holder and will, in addition to any other indemnity provided to CFH Clearing by Account Holder, indemnify CFH Clearing from any losses, damages, liabilities and expenses, of any kind or nature whatsoever, arising there from. Account Holder also agrees to hold CFH Clearing harmless and to indemnify it as to any expense, damage or liability (including legal fees) sustained by it with respect to any and all acts and practices of Fund Manager regarding the Account, including all losses arising there from and debit balance(s) due thereof.

Account Holder acknowledges that Account Holder and Fund Manager, by separate agreement, have agreed on the method by which Fund Manager will be compensated for services rendered to Account Holder. Account Holder hereby agrees to indemnify and hold harmless CFH Clearing and its affiliates and employees from any loss, damage or dispute arising out of or relating to the calculation and payment of such fees to Fund Manager.

**DATE AND INITIALS OF THE ACCOUNT HOLDER**

Date	Initials

**EXCLUSIONS, LIMITATIONS AND INDEMNITY (CONTINUED)**

All statements, notices, correspondence and the like generated in the Account will be sent or given to Fund Manager at the address shown for this Account and to Account Holder at the address indicated in Account Holder's Account documents, and to such other person or address as Account Holder has granted trading authority to Fund Manager. Account Holder acknowledges and understands that it is the sole responsibility of Account Holder to review the account statements as available on the CFH Online Facility, and that it is Account Holder's obligation to contact CFH Clearing in the event Account Holder has any questions concerning the statements.

**RISK WARNING**

Account Holder understands and agrees that there are many strategies that can be used in trading foreign exchange, some of which have unlimited risk of loss and could result in Account Holder sustaining a total loss of all funds in the Account and, furthermore, that Account Holder is liable for any deficit in the Account resulting there from. Account Holder acknowledges and agrees that Account Holder has had the opportunity to discuss with Fund Manager, and understands the nature and risks of the strategy to be used in connection with foreign currency transactions effected for Account Holder's Account.

**TERMINATION**

This authorisation is a continuing one and will remain in full force and effect until revoked by Account Holder, or by an authorised person on Account Holder's behalf, by written notice given to CFH Clearing. Such revocation will become effective only upon the confirmation of receipt thereof by CFH Clearing but will not affect any liability in any way resulting from transactions initiated prior to its confirmation. Upon receipt of the revocation, CFH Clearing will have the right to close positions in Account Holder's Account at the prevailing market prices as determined by CFH Clearing in its sole discretion and return funds to Account Holder. This authorisation will inure to the benefit of CFH Clearing, its successors and assigns. The provisions hereof will be in addition to, and will in no way limit or restrict, any right that CFH Clearing may have under any agreement with Account Holder.

In the event termination is effected in accordance with the above, thus a revocation of the POA, the Account Holder's assigned Fund Manager will continue to have access to the Account Holder's account until close of business at 22:00 GMT, at which point the account balance will be settled. In the event the Account Holder suspects any irregular/ unauthorised activity by its Fund Manager, the Account Holder must notify CFH Clearing immediately.

**JURISDICTION**

This Limited Power of Attorney is governed by and construed in accordance with English Law.

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**INDIVIDUAL ACCOUNT · SIGNATURE AND CONSENT**

**SIGNATURE AND CONSENT**

*I the undersigned hereby certify that:*

- > *This Form is completed by and on behalf of the Account Holder and not by a third party;*
- > *I have carefully read and completed this Form and affixed my initials to attest this on all pages of this Form submitted to CFH Clearing;*
- > *All information provided in this Form is correct and that I shall be obliged to inform CFH Clearing immediately should any of the provided information change;*
- > *I acknowledge and understand that CFH Clearing will act on instructions by my Fund Manager in accordance with the authorisations granted by me to my Fund Manager under the Power of Attorney in this Form on this date (if applicable);*
- > *Any damages suffered by CFH Clearing as a result of CFH Clearing relying on the information in this Form that is inaccurate or false shall be borne by the Account Holder;*
- > *Personal information submitted by me/ us to CFH Clearing may:*
  - o *be used with by any entity within CFH Clearing and its group companies (please see [www.cfhclearing.com](http://www.cfhclearing.com) for a full list of all group companies) for the purpose of providing sales and marketing information including new products and services;*
  - o *be shared with a third party introducer (if indicated so in this Form) for the purpose of completing the due diligence and approving my application;*
  - o *be used to undertake a search with credit reference agencies or other organisations to reduce the incidence of fraud and/ or in the course of carrying out identity fraud prevention or credit control checks;*
- > *This Form is signed in one (1) original copy which shall at all times be kept with CFH Clearing.*

**SIGNATURE**

**ACCOUNT HOLDER**

Full name
Date (DD/MM/YYYY)
Signature

**DATE AND INITIALS OF THE ACCOUNT HOLDER**

Date	Initials
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