

INVESTOR ACCOUNT OPENING FORM



THINK INVESTMENTS. THINK BMA



BMA CAPITAL MANAGEMENT LIMITED

Corporate Member, Pakistan Stock Exchange Limited
Level - 8, Unitower, I.I. Chundrigar Road, Karachi, 74000, Pakistan
UAN: +92 21 111 262 262 | Fax: +92 21 3242 2380
Customer Service: +92 21 111 BMA TRADE, +92 21 111 262 872
www.bmacapital.com | bmatrade@bmacapital.com
PSX Membership # K-022

ACCOUNT OPENING STEPS

Dear Client,

Kindly follow the following steps to complete your Account Opening Process with BMA Capital Management Limited.

Attach the appropriate / applicable documents as per the following Account Documentation Checklist:

DOCUMENTATION

1. Certified true copy of Board Resolution.
2. Letter of authorization and specimen of authorized signatory(ies).
3. Certified true copy of Memorandum and Article of Association / Bylaws / Charter (Relevant Document where applicable).
4. Certified true copy of Certificate of Incorporation (If applicable).
5. Certified true copy of Certificate of Commencement of business (If applicable).
6. Certified true copy of Registered Trust Deed / approval letter from Income Tax authorities (Incase of trust).
7. Power of Attorney (If applicable).
8. NTN Certificate.
9. Copies of CNIC / NICOP / Passport / of authorized signatory(ies).
10. Certified true copy of list of Directors.
11. In case of Foreign Corporate Entity, all documents must be attested by notary public of respective country or attested by consulate office of Pakistan.
12. Each and every column must be duly filled by the Account Holder(s). Each page of this form must be duly filled by Account Holder(s). [This form has been made as per Securities & Exchange Commission of Pakistan].

The duly filled and signed forms along with the necessary documents may please be submitted or mailed to:

Investor Accounts
 BMA Capital Management Limited
 801 Uni Tower,
 I.I. Chundrigar Road, Karachi - 74000, Pakistan

Or faxed at: +92 21 3242 2380; ATTN: Investor Accounts.

(Note: Subsequent to faxing your Account Opening forms, the original may please be sent / mailed to us at the address given above).

13. Upon receipt of your forms, Account Opening process is initiated, after completion of which, confirmation of the same will be mailed to you within a period of 7 working days.
14. The confirmation of your Account shall contain your Account number, our charges and commission schedule, relevant contact numbers and BMA Account Number where you can deposit the initial / margin amount required to initiate trading / transacting. Additional information regarding your Account will also be contained therein.

SPECIAL TERMS AND CONDITIONS

1. All transactions between the parties shall be subject to the Articles, Rules and Regulations of the Exchange, revised policies, Board Directions and new regulations to be framed in pursuance of Section 34 of the Securities & Exchange Ordinance, 1969. Moreover, all applicable provisions of the Securities & Exchange Ordinance, 1969 read with the Securities & Exchange Commission of Pakistan Act, 1997, Brokers conduct and the Central Depository Companies of Pakistan Act, 1997 Rules framed there under and the National Clearing and Settlement System Regulations and any other law for the time being in force. The Broker shall ensure provisions of copies of all the above Laws, Rules and Regulations at his office for access to the Account Holder(s) during working hours.
- 1(a). In case any dispute in connection with the trade or transaction between the Broker and the Account Holder is not settled amicably, either party may refer the same to the arbitration in accordance with the provisions of General Regulations of the Exchange, which shall be binding on both the parties. The Account Holder hereby agrees that he would have no objection if his name and other relevant particulars are placed on Exchange's database accessible by members of the Exchange if he fails or refuses to abide by or carryout any arbitration award passed against him in his dispute with the Broker.
2. The amount deposited as security margin by the Account Holder(s) with the Broker shall only be used for the purpose of dealing in securities, such as trading and / or settlement of deliveries of securities on behalf of the Account Holder(s). The Broker shall not use such amount(s) for his own use.
- 2(a). The credit amount of the Account Holder(s) shall be kept by the Broker in a separate bank account titled "Account Holder / Client Account" and shall not be used by the broker for his own business.
3. The Broker shall be authorized to act on the verbal instructions of the Account Holder(s). The Broker shall provide a written confirmation of the executed transaction(s) as required under rule (4(4) of the Securities & Exchange Rules, 2971, and all such transaction(s) recorded by the Broker in his books shall be conclusive and binding upon the Account Holder(s), which shall not be questioned by him/her/them, subject to clause 5 below.
4. The Broker shall provide the confirmation of the executed transactions to the _____ (Name of Account Holder) at the above stated address by means of acceptable mode of communication or by hand subject to acknowledgement receipt as note din clause 16.
5. In case there are any error(s) in the daily confirmation statement, the Account Holder(s) shall report the same to the broker within one business day of the receipt of confirmation. In case the Account Holder(s) do not respond within one business day of the receipt of the said daily confirmation statements, the confirmation statement shall be deemed conclusively accepted by the Account Holder(s).
6. In the event that the Account Holder(s) fail(s) to deposit additional cash or securities as margin within one business day or the margin call (in writing), the Broker shall have absolute discretion to and, without further notice to Account Holder(s), liquidate the Account Holder(s) outstanding positions, including the securities purchased and carried in such account, so that the margin is maintained at the required level.
7. The broker shall be responsible to ensure delivery of CDC eligible securities in the CDC Account of the Account Holder(s) subject to full payment by the Account Holder(s). In case of companies which are not on the CDS, the Broker shall ensure delivery of physical shares along with verified transfer deeds against payments, to the Account Holder(s). Further, the broker shall be responsible for the payment of any credit cash balance available in the account of the Account Holder(s) preferably in form of A/C Payee cross cheque only within 1 business day of the request of the Account Holder(s) (subject to the maintenance of the margin requirements).
- 7(b). In the event of non-receipt of payment from the Account Holder(s) on settlement day against securities bought on account of the Account Holder, the Broker may transfer such securities to his Collateral Account under intimation to the Exchange, after complying with the requirements as mentioned in the General Regulations of the Exchange.
8. The Broker shall accept from the Account Holder(s) payments through "A/C Payee Only" crossed cheque, bank drafts, pay orders or other crossed banking instruments in case of amounts in excess of Rs. 25,000/-. Electronic transfer of funds to the Broker through banks would be regarded as good as cheque. The Broker shall be responsible to provide the receipt the Account Holder(s) in the name of the Account Holder(s) duly signed by authorized agents/employee of the Broker and the Account Holder(s) shall be responsible to obtain the receipt thereof. In case of cash dealings, proper receipt will be taken and given to the Account Holders), specifically mentioning if payment is for margin or the purchase of securities. The broker shall immediately deposit in its bank account all cash received in whole i.e. no payments shall be made from the cash received from clients. However, in exceptional circumstances, where it becomes necessary for broker to accept cash in excess of Rs. 25,000/- the broker shall immediately report within one business day such instances with rationale thereof to the Exchange in accordance with the mechanism prescribed by the Exchange.
9. The members shall make all the payments of Rs. 25,000/- and above, through crossed cheques / bank drafts / pay orders or any other crossed banking instruments showing payment of amount from their business bank account. Copies of these payment instruments including cheques / pay orders / demand drafts and online instructions hall be kept in record for a minimum period of five years.
10. The Account Holder(s) shall have a right to obtain a copy of his/her or their ledger statement under official seal and signature of the Broker or his authorized representative on a periodic basis. In case of any discrepancy in the ledger statement, the Account Holder(s) shall inform the Broker within 1 day of receipt of the ledger statement to remove such discrepancy.
11. The Account Holder(s) shall operate the account and execute transactions himself/herself/themselves unless the Account Holder(s) authorize Mr./Ms./_____ I.D. No. _____ to transact in the account. All transactions execute by the authorized person shall be binding upon the Account Holder(s).
12. **For Joint Account Holder(s) only:**
We, the Account Holder(s) shall operate the account jointly or severally and the instructions issued either jointly or severally shall be binding on us as well as upon the Broker in respect of the joint titled account.
Or
Our titled account shall be operated only by _____ who shall be deemed as the authorized person for operating the joint account or issuing any instructions relating thereto.
13. The Broker shall be responsible to append a list of his authorized agents/traders and designated employees, who can deal with the Account Holder(s), with this Account Opening Form and a copy of both the Opening Form and the list will be provided to the Account Holder(s). Any change therein shall be intimated in writing to the Account Holder(s) with immediate effect.
14. The Broker shall debit the account of the Account Holder(s) for the commission charges or any other charges in connection with the brokerage services rendered, which shall be clearly detailed in the ledger statement/daily confirmations.
15. The Broker shall not disclose the information of the transactions of the Account Holder(s) to any third party and shall maintain the confidentiality of this information. However in case the Exchange or the commission, as the case may be, requires any such information, the broker shall be obliged to disclose the same for which the Account Holder(s) shall not raise any objection whatsoever.
16. In case the Broker converts his individual membership rights to corporate membership and vice versa, the agreement and conditions laid down herein above shall remain effective unless otherwise agreed by the parties.
17. Acceptable mode of communication between the Account Holder(s) and the Broker shall be through letter (courier / registered post / fax / E-mail) or by hand subject to receipt / acknowledgement. The onus of proving that the e-mail has been received by the recipient shall be on the sender sending the e-mail. Confirmation of orders to clients made through fax or e-mail will have a time record.
18. All orders received telephonically and placed on KATS shall be supported by recording on dedicated telephonic lines, preferably connected with a computerized taping system so as the orders could possibly be sorted on UIN basis and made user friendly.
19. In case of change of address or contact numbers of either party, the concerned party shall immediately notify the other party of the changes in writing.
20. I/We, the Account Holder(s) acknowledge receipt of this Account Opening Form (signed here by me/us in duplicate) along with the copies of all the annexures and I/we, the Account Holder(s) also undertake that I/we have understood all the above terms and conditions of this agreement which are acceptable to me/us.
21. I/We, the Account Holder(s) understand(s) that the shares trading business carries risk and subject to the due diligence on part of the broker, I/We may incur losses for which I/We, the Account Holder(s) shall not hold the broker responsible.
22. I/We, the Account Holder(s) further confirm that all information given in this application is true and complete and hereby authorize the broker to verify any information mentioned above.

WITNESSES:

- | | | |
|----------------|----------------|------------------|
| 1) Name: _____ | CNIC No: _____ | Signature: _____ |
| 2) Name: _____ | CNIC No: _____ | Signature: _____ |

ENCLOSURE OF DOCUMENTS:

- | | |
|---|---|
| 1) Certified true copy of Board Resolution (specimen provided as per Annexure 'A'). | 2) Certified true copies of Memorandum & Articles of Association. |
| 3) List of authorized signatories. | 4) List of nominated persons allowed to place orders. |

1. _____ 2. _____ 3. _____ 4. _____
 Authorized Signatories of The Applicant Broker



BMA Capital Management Limited

Level 8, Unitower, I.I. Chundrigar Road,
Karachi - 74000 Pakistan
Tel: +92 21 111 262 262 Fax: +92 21 3242 2380

For official use of the Participant only	
Application Form No:	
CDS Participant ID:	01826
Sub-Account No:	
Trading Account No: <i>(if applicable)</i>	

SUB-ACCOUNT OPENING FORM FOR A COMPANY OR OTHER BODY CORPORATE

(Sub-Accounts are opened and maintained by Participants in accordance with the CDC Regulations made pursuant to Section 4 of the Central Depositories Act, 1997)

(Please use BLOCK LETTERS to fill the form)

I/WE hereby apply for opening of my/our Sub-Account under the Account Family of BMA Capital Management Ltd. (Hereinafter referred to as "Participant") maintained in the Central Depository System ("CDS") or the Central Depository Company of Pakistan Limited ("CDC"). Our particulars are given as under:

A. REGISTRATION (AND OTHER) DETAILS OF MAIN APPLICANT												
1. Full Name of Applicant <i>(As per constitutive documents)</i>												
2. Registration Number / Unique Identification Number (UIN):												
3. Contact Details of Main Applicant												
(a) Mailing (Postal) Address:												
(b) Contact No:	Land Line No:	Local Mobile No. of Contact person(*):										
(c) Fax:			(d) Email: (*)									
(e) Registered Office / Head Office Address:												
4. Details of Contact Person of the Applicant: <i>(Should only be an official or an Attorney of the Applicant)</i>												
(a) Name: Mr. / Mrs. / Ms.												
(b) Association of the Attorney with the Applicant:												
(c) Address:												
d. Computerized National Identity Card No / NICOP: <i>(Only where contact person is Attorney)</i>												
e. Expiry Date of CNIC / NICOP:												
<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>					D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y					
(f) Contact No:	Land Line No:	Local Mobile No. (*):										
(g) Fax: (optional)	(h) Email Address: (*)											
Shareholder Category <i>(Please tick (✓) the appropriate box)</i>	INVESTMENT COMPANY <input type="checkbox"/>	LEASING COMPANY <input type="checkbox"/>	MODARABA <input type="checkbox"/>	MUTUAL FUND <input type="checkbox"/>								
	INSURANCE COMPANY <input type="checkbox"/>	BANK / FINANCIAL INSTITUTION <input type="checkbox"/>	MODARABA MANAGEMENT COMPANY <input type="checkbox"/>	OTHER (PLEASE SPECIFY) <input type="checkbox"/>								
	CHARITABLE TRUST <input type="checkbox"/>	JOINT STOCK COMPANY <input type="checkbox"/>	COOPERATIVE SOCIETY <input type="checkbox"/>	_____ <input type="checkbox"/>								
B. OTHER INFORMATION OF THE APPLICANT												
1. Dividend Mandate <i>(Please tick (✓) the appropriate box)</i>		Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please give details:								
(a) Account Title:		(c) Name of Bank:										
(b) Account No:		(d) Branch Address:										
2. National Tax No.:		3. Nationality:										
4. Residential Status: <i>(Please tick (✓) the appropriate box)</i>	Resident	Non-Resident	Repatriable	Non-Repatriable								
Pakistani	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Foreign Company / Corporate Body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
5. If you are maintaining any Special Convertible Rupee Account (SCRA), please provide details in (a) to (c):	(a) SCRA Account No:		(b) Bank Name:									
	(c) Branch Details:											

*At least one field must be mandatory filled.

1. _____ 2. _____ 3. _____ 4. _____
Authorized Signatories of The Applicant Participant

C. CDC SMS / IVR / WEB SERVICES ("CDS" access)			
CDC provides FREE OF COST services under CDC access whereby sub-account holders can have real time access to their account related information.			
1(a). SMS or eAlert / eStatement is a mandatory service, where alerts are sent whenever certain activities take place in a sub-account. eStatement is a service where your account balance statement will be electronically transmitted to your email address. Please subscribe to either SMS or eAlert / eStatement service as a mandatory requirement. You can also subscribe to both the services.			
<input type="checkbox"/> Short Messaging Service (SMS)	Mobile No: (†)	(†) of Contact Person as provided in Part A of this Form.	
<input type="checkbox"/> eAlert / eStatement Service	Email Address: (†)		
1(b). If you have subscribed for eStatement, please specify the frequency of eStatement: [Please tick (✓) the appropriate box]		<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly
2. Do you wish to subscribe to free of cost IVR Service? [Please tick (✓) the appropriate box]		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Do you wish to subscribe to free of cost Web Service? [Please tick (✓) the appropriate box]		<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. If you are subscribing to IVR and/or Web Service, please provide following details of your Contact Person:			
(a) Date of Birth:	D	D	M
(b) Mother's Maiden Name:	M	M	Y
		Y	Y
		Y	Y
		(c) Email Address (of Contact Person as provided in Part A of this Form.):	
D. SUB-ACCOUNT OPERATING INSTRUCTIONS			
1. Signatory(ies) to give instruction to the Participant pertaining to the operations of the Sub-Account. <i>(Please specify Sub-Account operating instructions in the relevant column along with names and specimen signature(s) of authorized signatory(ies).</i>	Name(s) of Signatory(ies)		Specimen Signature(s)
	1		
	2		
	3		
	4		
	5		
	6		
2. Sub-Account Operating Instructions: <small>[Please tick (✓) the appropriate box]</small>	<input type="checkbox"/> Singly	<input type="checkbox"/> Attorney	
	<input type="checkbox"/> Jointly [any] _____	<input type="checkbox"/> Any other	
			Please specify: _____
G. AUTHORIZATION UNDER SECTION 12 AND 24 OF THE CDC ACT EXCLUSIVELY FOR SETTLEMENT OF UNDERLYING TRADES INCLUDING PLEDGE AND RECOVERY OF CHARGES AND LOSSES			

I/We the undersigned, hereby give my/our express authority to the participant under Section 12 and Section 24 of the Central Depositories Act, 1997 to handle Book-entry Securities beneficially owned by me/us and entered in my/our Sub-Account maintained with the Participant for securities transactions that are exclusively meant for the following purposes:

- a. For the settlement of any underlying market transactions (trades) including off market transactions made by me/us from time to time;
- b. For pledge securities transactions with any Stock Exchange or a Clearing Company relating to any of my/our underlying market transactions (trades) to be settled through the clearing Company from time to time;
- ba. For, where applicable, pledging of my/our securities only with a Stock Exchange in accordance with the requirements of regulations of such Stock Exchange for meeting any shortfall in the margin and/or mark-to-market losses requirements of the Participant and/or other Sub-Account Holder(s) of the Participant;
- c. For the recovery of payment against any underlying market purchase transactions made by me/us from time to time;
- d. Movement by me/us from time to time of my/our Book-entry Securities from my/our Sub-Account under the Main Account under the control of the Participant to my/our Sub-Account under another Main Account under the control of the Participant or to my/our Sub-Account under any main Account which is under the control of another Participant or to my/our Investor Account;
- e. Securities transactions which has been made by way of a gift Securities by me/us to my/our Family Members or other persons in accordance with the CDC Regulations from time to time;
- f. Securities transactions pertaining to any lending or borrowing of Securities made by me/us from time to time in accordance with the CDC Regulations;
- g. For the recovery of any charges or losses against any or all of the above transactions carried out by me/us or services availed; and/or
- h. Delivery Transaction made by me/us for any other purpose(s) as prescribed by the Commission from time to time. Specific authority on each occasion shall be given by me/us to the Participant for handling of book-entry Securities beneficially owned by me/us for all other purposes as permitted under the applicable laws and regulations.

Specific authority on each occasion shall be given by me/us to the Participant for handling of book-entry Securities beneficially owned by me/us for all other purposes as permitted under the applicable laws and regulations.

Note: Please note that above shall serve as a one-time fixed authorization to the Participant for handling of book-entry Securities owned by the undersigned Sub-Account Holder(s) and entered in his/her/their Sub-Account maintained with the Participant. Handling of book-entry Securities for all other purpose(s) should however require specific authority in writing from the undersigned Sub-Account Holder(s) in favor of the Participant. For handling of Book-entry Securities worth Rs. 500,000/- and above, the above mentioned specific authority shall be obtained on non-judicial stamp paper.

1. _____ 2. _____ 3. _____ 4. _____
 Authorized Signatories of The Applicant Participant

IMPORTANT

Please read and understand the Terms and Conditions before signing and executing this form

TERMS AND CONDITIONS

The Terms and Conditions set herein below shall govern the Sub-Account forming part of the Account Family of the CDS Participant Account of the Participant, which shall be binding on the Sub-Account Holder as well as the Participant:

1. Provisions of the Central Depositories Act, 1997 ("the Act") and the Central Depository Company of Pakistan Limited Regulations ("the Regulations") as amended from time to time and the CDC's Operating Manual/Operating Instructions developed and issued pursuant thereto from time to time and any other by-laws, directives of the Securities and Exchange Commission of Pakistan issued from time to time, shall govern the opening, maintenance and operations of the Sub-Account.
2. Each page of this form should be duly signed by the authorized signatories of the Applicant and the Participant or any authorized person of the Participant.
3. The Participant shall ensure provision of copies of all the relevant laws, rules and regulations at his office for access to the Sub-Account Holder(s) during working hours.
4. The Participant shall provide a list of his authorized agents/traders and designated employees, who can deal with the Sub-Account Holder(s) from time to time. Any change(s) therein shall forthwith be intimated in writing to the Sub-Account Holder(s).
5. The Registration Details and such other information specified by the Applicant in this form for opening of the Sub-Account appear in the Sub-Account to be established by the Participant in the Central Depository System who shall ensure the correctness and completeness of the same. Any change therein notified by the Sub-Account Holder from time to time in writing to the Participant shall reflect in the Sub-Account of such Sub-Account Holder.
6. The Book-entry Securities owned by the Sub-Account Holder shall be exclusively entered in the Sub-Account of such Sub-Account Holder.
7. Transfer, Pledge and Withdrawal of Book-entry Securities entered in the Sub-Account of the Sub-Account Holder shall only be made from time to time in accordance with the authorization given by the Sub-Account Holder to the Participant in Part (E) above pursuant to Sections 12 and 24 of the Act. Such authorization shall constitute the congregated / entire authorizations by the Sub-Account Holder(s) in favour of the Participant and supersedes and cancels all prior authorizations (oral, written or electronic) including any different, conflicting or additional terms which appear on any agreement or form the Sub-Account Holder(s) has executed in favour of the Participant.
8. Participant shall be liable to give due and timely effect to the instructions of the Sub-Account Holder given in terms of the above-referred authorization with respect to transfer, pledge and withdrawal of Book-entry Securities entered in his Sub-Account under the control of the Participant. Such instructions, among other matters, may include closing of Sub-Account.
9. Participant shall send within 10 days of end of each quarter Account Balance statement to the Sub-Account Holder without any fee or charge showing the number of every Book-entry Security entered in his Sub-Account as of the end of the preceding quarter. Such Account Balance statement shall be generated from the CDS. Further, the Sub-Account Holder may request for such statement (including Account Activity reports) from the Participant at any time on payment of a fee on cost basis as prescribed by the Participant. The Participant shall be liable to provide such report/statement to the Sub-Account Holder within 3 Business Days from the date of receipt of such request, with or without charges.
10. In consideration for the facilities and services provided to the Sub-Account Holder by the Participant, the Sub-Account Holder shall pay fees and charges to the Participant as applicable for availing such facilities and services under the Act, the Regulations and these Terms & Conditions. In case of outstanding payment against any underlying market purchase transaction, charges and/or losses against the Sub-Account Holder, the Participant shall have the right, subject to Clause 7 above and under prior intimation to the Sub-Account Holder to clear the payment, charges and/or losses (including any shortfall in margin requirements) within the reasonable time prescribed by the Participant, to dispose off the necessary number of Book-entry Securities of the Sub-Account Holder and apply the net proceeds thereof towards the adjustment of such outstanding payment, charges and/or losses, provided that the Participant shall report the disposal of such Securities to the relevant Stock Exchange as an off-market transaction where the Securities are transferred from the Sub-Account to the House Account of the Participant.
11. Participant shall have the right, subject to 20 Business Days prior written notice to the Sub-Account Holder to close the Sub-Account if it becomes dormant with no holding balances. No Sub-Account shall be treated as dormant unless there is no activity for continuous six months.
12. Where admission of Participant to the CDS is suspended or terminated by the CDC, the Sub-Account Holder shall have the right, subject to the Regulations and the Procedures made thereunder, to request CDC to change his Controlling Account Holder and Participant shall extend full cooperation to the Sub-Account Holder in every regard, without prejudice to his right of recovery of any dues or receivable from the Sub-Account Holder.
13. These Terms and Conditions shall be binding on the Participant's nominee, legal representative, successors in interest and/or permitted assigns.
14. In the event of any conflict between these Terms and Conditions and the terms and conditions contained in Trading Account Opening Form or any other forms/authorizations prescribed by the Participant or otherwise, the Terms and Conditions contained herein shall prevail, insofar as it is related to the custodial services to be provided by the Participant under the legal framework of CDC.
15. The provision of services as provided for hereunder shall not constitute Participant as trustee and the Participant shall have no trust or other obligation in respect of the Book-entry Securities except as agreed by the Participant separately in writing.
16. The Participant is not acting under this application form as Investment Manager or Investment Advisor to the Sub-Account Holder(s).
17. The Participant should ensure due protection to the Sub-Account Holder regarding rights to dividend, rights or bonus shares etc. in respect of transactions routed through him and not do anything which is likely to harm the interest of the Sub-Account Holder with/from whom it may have had transactions in securities.
18. Subject to Section 21 of the Act, Participant shall maintain complete confidentiality of any information or document that is in his knowledge or possession or control relating to the affairs of the Sub-Account Holder(s), and in particular, relating to their Sub-Account(s), and shall not give, divulge, reveal or otherwise disclose such information or document to any other person.
19. These Terms and Conditions shall be deemed to have been amended, altered and/or modified if rights and duties of the parties hereto are altered by virtue of change in law, rules, regulations etc. of SECP and/or articles, rules, regulations of the Stock Exchanges and/or the Act, CDC Regulations, CDC's Operating Manual/Operating Procedures and/or any circular, directive or direction issued therein, such changes shall be deemed to have been incorporated and modified the rights and duties of the parties hereto.
20. The Participant shall ensure that duly filled in and signed copy of this form along with the acknowledgement receipt is provided to the Sub-Account Holder.

1. _____ 2. _____ 3. _____ 4. _____
 Authorized Signatories of The Applicant Participant

DECLARATION & UNDERTAKING

I/We, the undersigned, hereby declare that:

- a) We are not in receivership, court-appointed management or under winding-up or under any analogous form of administration;
- b) We are not applied to be adjudicated as an insolvent and that we have not suspended payment and that we have not compounded with our creditors;
- c) We are not undischarged insolvent;
- d) None of our chief executive, directors or other officers have, at any time within 5 years before making this application, been convicted of an offence involving moral turpitude or a non-congrisable offence against any law in connection with our business, professional or commercial activities;
- e) We confirm having read and understood the above terms and conditions and we hereby unconditionally and irrevocably agree and undertake to be bound by and to comply with the above Terms and Conditions and any other terms and conditions which may be notified from time to time with the approval of the concerned authorities modifying or substituting all or any of the above Terms and Conditions in connection with the opening, maintenance and operation of the Sub-Account;
- f) We, being the Applicant, hereby further confirm that all the information contained in this form is true and correct to the best of our knowledge as on the date of making this application; and
- g) We further agree that any false/misleading information by us or suspension of any material fact will render our Sub-Account liable for termination and further action under the law;
- h) We hereby now apply for opening, maintaining, operation of Sub-Account forming part of the Account Family of CDS Participant Account of the Participant.

Signature:

1. _____ 2. _____ 3. _____ 4. _____
 Authorized Signatories of The Applicant Participant

DISCLAIMER FOR CDC ACCESS

The main objective of providing information, reports and account maintenance services through the interactive Voice Response System, Internet/Web access and Short Messaging Service ("SMS") or any other value added service is to facilitate the Sub-Account Holder(s) ("Users") with a more modern way to access their information. CDC makes no other warranty of the IVR, Internet/Web access, SMS or any other value added services and Users hereby Unconditionally agree that they shall make use of the internet/web access subject to all hazards and circumstances as exist with the use of the internet. CDC shall not be liable to any Users for providing and making available such services and for failure or delay in the provision of SMS to Users and all users, who use the IVR, internet access, SMS or any other value added services, shall be deemed to have indemnified CDC, its directors, officers and employees for the time being in office and held them harmless from and against any losses, damages, costs and expenses incurred or suffered by them as a consequence of use of the IVR system internet/web access, SMS or any other value added services.

All Users hereby warrant and agree that their access of the internet/web by the user of a User-ID and login is an advanced electronic signature and upon issuance of such User-ID to the User, they hereby waive any right to raise any objection to the compliance of the User-ID and login with the criteria of an advance electronic signature.

All Users shall by signing this Form and by their conduct of accessing the IVR, internet/Web access, SMS or any other value added services agree to all the terms and conditions and terms of use as shall appear on the CDC website at www.cdcaccess.com.pk which shall be deemed to have been read and agreed to by the Users before signing this form.

Authorized Signatories of the Applicant:	Specimen Signature	Date & Place:
1		
2		
3		
4		
5		
6		

For and on behalf of
(In case if signed by the Attorney on behalf of the Applicant)

We hereby agree to admit the Applicant as the Sub-Account Holder in terms of the above Terms and Conditions as amended from time to time and shall abide by the same in respect of opening, maintenance and operation of such Sub-Account.

Name of Participant: BMA CAPITAL MANAGEMENT LIMITED **Date:**

Participant's Seal & Signature: _____

Witnesses:

1. Name:

Signature: _____ **CNIC No:** | | | | | - | | | | | - |

2. Name:

Signature: _____ **CNIC No:** | | | | | - | | | | | - |

Enclosures:

- 1. Certified copy of Board Resolution / Power of Attorney*
- 2. Attested copies of Computerized National Identity Cards / NICOP / Passports of the Authorized Signatory(ies)
- 3. Certified copies of Constitutive Documents of the Applicant (memorandum & Articles of Association, Act / Charter / Statute / Bylaws / Rules & Regulations, Certificate of Incorporation, Certificate of commencement of business, prospectus for Modaraba, relevant licenses and registration issued by regulatory bodies etc.)*
- 4. Certified copy of NTN Certificate / Trustees (if applicable)*
- 5. Certified copy of list of Directors / Trustees (if applicable)*

*Where the Applicant is a non-resident or foreigner, duly consularized copy of Board Resolution / Power of Attorney along with Constitutive Documents and List of Directors / Trustees by the Consul General of Pakistan having jurisdiction over the Applicant(s) should be submitted.

H. FOR THE USE OF PARTICIPANT ONLY			
Particulars of Sub-Account Opening Form verified by:			
		Stamp:	
Application:	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected	Date:
Account Opened by:		Signature: (Authorized Signatory)	
Saved by:		Posted by:	
Signature:	Date:	Signature:	Date:
Remarks: (if any)			

ACKNOWLEDGEMENT OF RECEIPT	
Application No:	Date of receipt:
I/We hereby confirm and acknowledge the receipt of duly filled and signed Sub-Account Opening Form from the following Applicant:	
Insert name of Applicant(s)	Participant's Seal & Signature:
1.	
2.	
3.	
4.	

**THIS PAGE HAS BEEN LEFT BLANK INTENTIONALLY
THE CDC SUB ACCOUNT FORM ENDS AT THE PREVIOUS PAGE**

ANNEXURE

ANNEXURE "A"

SAMPLE OF BOARD RESOLUTION

(TO BE PRINTED ON COMPANY'S LETTERHEAD)

BOARD RESOLUTION

"RESOLVED that an application be made on behalf of _____ (Name of entity) to BMA Capital Management Limited for opening an Equity Share Trading Account and CDC Sub Account and for the aforesaid purpose the Account Opening Forms including Terms & Conditions as set out herein be executed on behalf of _____ (Name of entity).

FURTHER RESOLVED that (1) Mr./Ms. _____ (2) Mr./Ms. _____ (3) Mr./Ms. _____ (4) Mr./Ms. _____ be and are hereby authorized and empowered, either (Singly / Jointly) _____ for and on behalf of _____ (Name of entity) to sign and execute and deliver Equity Shares Trading Form and CDC Sub Account Opening Form and Terms & Conditions and other all documents in connection therewith, and to do any other act deed or thing for and on behalf of _____ (Name of entity) in respect of Company's application for opening an account.

FURTHER RESOLVED that (1) Mr./Ms. _____ (2) Mr./Ms. _____ (3) Mr./Ms. _____ (4) Mr./Ms. _____ be and are hereby authorized and empowered, either (Singly/Jointly) to represent to the broker on all matters pertaining to the maintenance and operation of the Account, to deal, liaise and correspond with Broker / Participant and give instruction to fulfill all the responsibilities and obligations to broker / Participant under the law, Rules and Regulations and terms and Conditions in relation to the Account from time to time, and to deal with other incidental and ancillary acts, things and deeds."

Company Secretary / CEO

ANNEXURE "B"

SAMPLE LETTER OF AUTHORIZATION

(TO BE PRINTED ON COMPANY'S LETTERHEAD)

Date: _____

Chief Executive
BMA Capital Management Ltd.
801, Unitower
I.I. Chundrigar Road,
Karachi

Subject: Letter of Authorization

Dear Sir,

I/We hereby authorize BMA Capital Management Ltd. to open trading Account / CDC Sub Account with the name of _____ (Name of Account Holder) and further we authorize (1) _____ (2) _____ (3) _____ (4) _____ to sign (Singly / Jointly) documents and give instruction pertaining to Equity trading and operate CDC Sub-Account for Shares and Security activities / settlement on our behalf.

Company Secretary / CEO

SPECIMEN SIGNATORIES

(1) _____
(Signature of Authorized Person 1)
Name: _____
Designation: _____

(2) _____
(Signature of Authorized Person 2)
Name: _____
Designation: _____

(3) _____
(Signature of Authorized Person 3)
Name: _____
Designation: _____

(4) _____
(Signature of Authorized Person 4)
Name: _____
Designation: _____

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- Portfolio Check On the Go
- Payments & Withdrawals
- Customization
- Trade Alerts



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App Store



FOR
OTHER PLATFORMS

You can track our digital footprints at

For Office Use Only:

Client Account No: _____

CDC Sub-Account No: **01826 -** _____

Trader Name

Trader Code

Client Code / Short Name

A/C Referred by

Account Opening Administrator

Risk Manager

Head of Operations

Head of RBG

Scanned by

Signature

Date

BMA CAPITAL MANAGEMENT LIMITED (HEAD OFFICE)

Level - 8, Unitower, I.I. Chundrigar Road, Karachi, 74000, Pakistan | **NTN: 0709929-7**

Tel: +92 21 111 262 262 | Fax: +92 21 3242 2380

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