

## **APPLICATION TO OPEN A CORPORATE ACCOUNT**

Board Resolution	
l (Name):	
Director of:	(the "Company")
Following a Board meeting of Directors o	of the Company held on
Date:	
Certify that:	
Each of the applicant's directors had offered:	as reviewed and considered the risks associated with the financial products
The board approves the transactio governed by the associated legal d	
	directors to sign any document in connection with the operation of the itten instruction in relation to the Account including, but not limited to,
	hy the Company should not conduct business in the financial products offered
Company Information	
Name of Company*:	
Registered Address*:	
	Postcode*:
Date of Incorporation*:	
Country of Incorporation*:	
Company Number*:	
I FI Number:	



## Identification of Sole Director/Director 1

We will verify a Director's identity before trading can occur on the account. To do this we will use a combination of electronic identification methods and documents where necessary.

Full Name*:		
Residential Address*:		
	Postcode*:	
Date of Birth*:		
Driving Licence:		
Email address*:	<del></del>	
Contact Phone number*:		
Identification of Director 2		
Full Name:		
Residential Address:		_
	Postcode:	
Date of Birth:		
Driving Licence:		
Email address:		
Contact Phono number:		



## **Identification of Shareholder**

We are required to verify all individuals who hold a significant interest in the Corporation. We do this by verifying shareholders who hold more than 25% ownership of the Corporation. Please list the particulars of all shareholders who hold more than a 25% stake and who are not already listed as Directors.

ruii Name:		
Residential Address:		_
	Postcode:	
Date of Birth:		
Driving Licence:		
Email address:		
Contact Phone number:		
Identification of Shareholder		
Full Name:		
Residential Address:		
	Postcode:	
Date of Birth:		
Driving Licence:		
Email address:		
Contact Phone number:		

If there are more than two shareholders who hold a stake of more than 25% and have not already been listed as a Director please reprint this page and fill in the additional information.



## **Supporting Documentation required**

- A copy of Incorporation Certificate or Business Registration Certificate
- Director's identities will be verified electronically where possible but may require further documentation
- Copy of Memorandum and Articles of Association
- Copy of recent Bank Account Statement (dated within the last 3 months)
- Proof of registered and postal address

Declarations *
Please mark with a cross to acknowledge each declaration.
I understand the agreement I am entering into with Finsa Pty Limited - (ACN: 158 065 635) (TradeDirect365 is a trading name thereof). I confirm that I have read, understood and agree with the <u>Product Disclosure Statement</u> , <u>Financial Services Guide</u> and <u>Client Agreement</u> .
I understand the nature and risks associated with trading CFDs. I confirm that I have read, understood and agree with the <u>Risk Warning Notice</u> .
I understand I am consenting to Finsa Pty Limited (TradeDirect365 is a trading name thereof) using my name, address and date of birth to verify my identity electronically with a credit reporting agency and obtaining an assessment of whether this matches information on my credit information file.
I consent to Finsa Pty Limited paying third parties for marketing, client acquisition and support services up to 50% of Spread Revenue derived from my trading activity with Tradedirect365. Spread Revenue is calculated by multiplying the difference between the offer and bid price of the market by the volume of the trade, eg a 10 contract trade on an Australia 200 Index quote of 5200-5201 would equate to \$10 in Spread Revenue (10 Contracts X 1 Spread Difference) The fee is taken out of the commission or spread charged and does not impact my trading costs.
Signature (Sole Director/Director1)
Date:
Signature (Director2)
Date:

<sup>\*</sup>All fields marked with an asterisk (\*) are required