

**Head Office:** 3<sup>rd</sup> Floor, North Side, House # 49, Road # 11, Block # H, Banani, Dhaka-1213, Bangladesh Phone: +880 2 55042694, Fax: +880 2 55042695, Email: info@wingsfin.com, Website: www.wingsfin.com

# **Account Opening Form**

Client Code:
BO ID: 1 2 0 6 5 1 0 0
Type of Account: Single Joint Company Link
Account Category: Regular Female Student NRB Custodian
Name of Applicant:
Name of Joint Applicant:
E-mail:
Phone Number:
Address:



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# **REQUIRED DOCUMENTS**

A. FOR INDIVIDUAL ACCOUNT (SINGLE AND JOINT):	YES / NO
<ol> <li>Three (3) Recent Passport Size Photographs of Single/Joint Applicants.</li> <li>Two (2) Recent Passport Size Photographs of Nominee(s). In case the nominee is a minor, 2 P.P. of the Guardi Two (2) Recent Passport Size Photographs of Authorized Person/POA.</li> <li>Photocopy of NID or valid Passport of Applicants (both Single and Joint).</li> <li>Photocopy of NID or Valid Passport of Authorized Person/POA.</li> <li>Photocopy of NID or Valid Passport of Nominee.</li> <li>If Nominee is minor, Birth Certificate of Nominee along with NID or Valid Passport of the Guardian.</li> <li>Bank Certificate/Bank Statement of the Applicant (both Single and Joint).</li> <li>Photocopy of Employee ID Card/(applicable only for service holder).</li> <li>Trade license / approval of operational head (if profession is business).</li> </ol>	an
ADDITIONAL DOCUMENTS FOR NRB AND FOREIGN NATIONALS:	YES / NO
<ol> <li>Photocopy of Passport with valid Visa (both Single and Joint)</li> <li>Foreign Currency (FC) Bank Account Certificate Containing Applicant's Name, Parent's Name and Bank Account Number</li> <li>Photocopy of Service Agreement with the Employer/Work Permit/Residence Permit/Business Documents.</li> <li>Tax Clearing Certificate (in case of Foreign National).</li> <li>Proof of addresses (Utility bill or any other documents that contain client's residence address).</li> <li>Two (2) signed copies of FATCA declaration for FC and NITA Accounts.</li> <li>W9 Form (for US citizens only)</li> </ol>	
B. FOR COMPANY/INSTITUTIONAL ACCOUNT:	YES / NO
<ol> <li>Two (2) Recent Passport Size Photographs of the Managing Director/CEO.</li> <li>Two (2) Recent Passport Size Photographs of all Authorized Persons and Signatories.</li> <li>Photocopy of NID or Valid Passport of MD/CEO, Authorized Persons, Signatories.</li> <li>Board Resolution/Resolution of Governing Body regarding Opening and Operation of BO Account.</li> <li>Photocopy of Trade License, Certificate of Incorporation, TIN and BIN (if any)</li> <li>Photocopy of Memorandum and Articles of Association certified by RJSC.</li> <li>Bank Certificate/Bank Statement of the Organization/Trust/Fund/Association.</li> <li>Trust Deed for Trust only.</li> <li>Photocopy of Constitution/bye Laws/Rules (for Trust/Association/Provident Fund).</li> <li>Confirmation Letter from NBR (for Provident Fund).</li> <li>Certificate of Registration for Trust/Association/Provident Fund.</li> </ol>	
<ol> <li>Two (2) Recent Passport Size Photographs of all Authorized Persons and Signatories.</li> <li>Photocopy of NID or Valid Passport of MD/CEO, Authorized Persons, Signatories.</li> <li>Board Resolution/Resolution of Governing Body regarding Opening and Operation of BO Account.</li> <li>Photocopy of Trade License, Certificate of Incorporation, TIN and BIN (if any)</li> <li>Photocopy of Memorandum and Articles of Association certified by RJSC.</li> <li>Bank Certificate/Bank Statement of the Organization/Trust/Fund/Association.</li> <li>Trust Deed for Trust only.</li> <li>Photocopy of Constitution/bye Laws/Rules (for Trust/Association/Provident Fund).</li> <li>Confirmation Letter from NBR (for Provident Fund).</li> </ol>	
<ul> <li>02. Two (2) Recent Passport Size Photographs of all Authorized Persons and Signatories.</li> <li>03. Photocopy of NID or Valid Passport of MD/CEO, Authorized Persons, Signatories.</li> <li>04. Board Resolution/Resolution of Governing Body regarding Opening and Operation of BO Account.</li> <li>05. Photocopy of Trade License, Certificate of Incorporation, TIN and BIN (if any)</li> <li>06. Photocopy of Memorandum and Articles of Association certified by RJSC.</li> <li>07. Bank Certificate/Bank Statement of the Organization/Trust/Fund/Association.</li> <li>08. Trust Deed for Trust only.</li> <li>09. Photocopy of Constitution/bye Laws/Rules (for Trust/Association/Provident Fund).</li> <li>10. Confirmation Letter from NBR (for Provident Fund).</li> <li>11. Certificate of Registration for Trust/Association/Provident Fund.</li> </ul>	YES / NO



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**CUSTOMER ACCOUNT INFORMATION FORM** 

# FOR INDIVIDUAL/JOINT APPLICANT ACCOUNT

Photograph(s) of Customer(s) with attestation of the Introducer

**FORM-11** [Sec rule 5(2)(e)]

[To be filled by the applicant(s) : Please complete all details in CAPITAL letters] Individual/Joint
Customer Account No. : Date:
BO ID No. : 1 2 0 6 5 1 0 0 Account Type: Cash Margin Account Status:Individual Joint Holder
Citizenship status (Please tick mark): Resident Bangladeshi Non-Resident Bangladeshi Foreigner Other  (Please Specify)
DETAILS OF FIRST APPLICANT/CUSTOMER:
Name of the Applicant/ Customer:
Father's Name:
Mother's Name:
Spouse's Name:
Date of Birth: Sex: Male Female Profession:
Mailing Address:
Permanent Address:
Nationality:
Phone No:
DETAILS OF SECOND APPLICANT/CUSTOMER:
Name of the Applicant Customer:
Father's Name:
Mother's Name:
Spouse's Name:
Date of Birth: Sex: Male Profession: Profession:
Mailing Address:
Permanent Address:
Nationality:
Phone No:
Is the applicant an Officer or Sponsor/ Director of any Broker/ Dealer/ Exchange/ Depository/ Clearing & Settlement Company/ Listed Company?  Yes No  If yes, please mention the name & address of the Broker/ Dealer/ Exchange/ Depository/ Clearing & Settlement Company/Listed Company with
designation of said officer or sponsor or director:
BANK ACCOUNT DETAILS:
Account Name:
Account Number:Routing Number:
Bank Name:

NOMINEE 1 DETAILS:									
Name:									
Father's Name:								Photograph	
Mother's Name:									
Permanent Address:									
Profession:	. Mobile N	o:		E-mail Address:.				Customer	
NID/ Birth Certificate/ Passport No.:.	•••••		Relation to the A	applicant(s):	Perc	entage	(%):		
NOMINEE 2 DETAILS:									
Name:									
Father's Name:								Photograph	
Mother's Name:								of Nominee with attestation	
Permanent Address:								of the	
Profession:								Customer	
NID/ Birth Certificate/ Passport No.:.			Relation to the A	pplicant(s):	Perc	entage	(%):		
AUTHORIZED PERSON DET	AILS (IF A	NY):							
Name:									
NID/ Birth Certificate/ Passport N	umber:							Photograph(s) of	
	NID/ Birth Certificate/ Passport Number:								
								Person attestation of	
E-mail Address:								the Customer(s)	
Source of Fund Details									
INTRODUCER DETAILS:									
Name:									
Client Account Number & Address	s:								
Mobile Number:									
Account operating instruction: Sing	ly operated		Jointly operated	Others (S	pecify)				
Do you have a Customer Account (S							give details:		
	Jingle/Joint	) With							
Client Code No.			BO Accoun	t No.		Nan	ne of TREC H	loider	
		<u> </u>							
	//								
<b>√</b>	13//								
Cignature of the First	Cian		of the Cooped	Cianatura of the	A th		Cianatura	of the Introduces	
Signature of the First Signature of the Second Signature of the Authorized Signature of the Internal Applicant with date Applicant with date Signature of the Internal Applicant with date Signature of the Authorized Signature of the Internal Applicant with date Signature of the Internal Applicant w									
			(For Officia	ıl use onlv)					
Processed by:			Checke		1		Approve	d by:	
1 10003500 by.			Ollecke	~ ~ ~ vy ·	1		Approve	~ ~ y ·	
Signature with Date & Seal			Signatura with	2 Data 9 Saal	-	<u> </u>	Pianatura witl	n Data & Caal	



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# CUSTOMER ACCOUNT INFORMATION FORM

# FOR COMPANY OR INSTITUTIONAL APPLICANT

Photograph(s) of Customer(s) with attestation of the Introducer

**FORM-11** [Sec rule 5(2)(e)]

[To be filled out by the applicant(s): Please com	plete all details in CAPITAL letters]
Internal Client No. :	Date:
BO ID No.: 1 2 0 6 5 1 0 0	Account Type: Cash Margin
Nationality : Bangladeshi Foreign Other (If other, please Specify)	
Type of the Company/Institution: Private Ltd. Public Ltd. NGO	Others (Please Specify):
DETAILS OF THE COMPANY/ INSTITUTION:	
Name of the Company/Institution:	
Corporate Address:	
Registered Address:	
Incorporation Certificate No.:	Date:
Business Commencement Certificate No. (if any):	Date:
Trade License No.:	Date:
TIN No.: BIN No. (in any):	VAT Registration Certificate No.:
Phone No: Mobile No: E-mai	I Address:
DETAILS OF MANAGING DIRECTOR/ CEO:	
Name of the Managing Director/ CEO:	
Father's Name:	
Mother's Name:	
Spouse's Name:	
Date of Birth:	Sex: Male Female
Mailing Address:	
Permanent Address:	
Nationality:	Driving License No
Phone No: Mobile No: E-mai	I Address:
Is the applicant an Officer or Sponsor/ Director of any Broker/ Dealer/ Exchange/ Yes No If yes, please mention the name & address of the Broker/ Dealer/ Exchange/ Dep designation of said officer or sponsor or director:	pository/ Clearing & Settlement Company/ Listed Company with
BANK ACCOUNT DETAILS:	
Routing Number:	
Account Number:	
Bank Name:	

Branch Name:.....

SIGNATORY 1 OF THE ACC	OUNT (IF AI	NY):				
Name of the Authorized Signatory						
Designation						
Mailing Address:						Photograph of authorized
NID/ Birth Certificate/ Passport No	o.:					Signatory with attestation of the
Phone No:		Mobile No:.				MD/CEO
E-mail Address:						
SIGNATORY 2 OF THE ACC	OUNT (IF AI	NY):				
Name of the Authorized Signatory						
Designation						
Mailing Address:						Photograph of
NID/ Birth Certificate/ Passport N	o.:					authorized Signatory with
Phone No:		Mobile No:.				attestation of the MD/CEO
E-mail Address:						WIB/GEG
Source of Fund Details				•••••		
INTRODUCER DETAILS:						
Name:						
Client Account Number & Address						
Mobile Number:						
Client Code No.		ВО Ассол	ınt No.		Name of TREC	Holder
					1/	
	//					
$\checkmark$	13//					
Signature of MD/CEO		the Authorized Person/	Signature of the Author		1 1 -	of the Introducer
with date	Signatory -	1 (if any) with date	Signatory - 2 (if an	y) with date	w	ith date
		(For Officia	al use only)			
Processed by:		Checke	ed by:		Approve	d by:
Signature with Date & Seal		Signature wit	h Date & Seal	$\vdash$	Signature with	Date & Seal



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CDBL Bye Laws Form 02

# BO ACCOUNT OPENING FORM [BYE LAWS 7.3.3 (B)]

Please complete all details in <b>CAPITAL</b> letters. Please fill all names correctly. All communication shall be sent only to the First Named Account Holder's correspondence address.
Application No. Date: d d m m y y y y
Please Tick whichever is applicable
BO Category: Regular Omnibus Clearing BO Type Individual Joint Holder Company
Name of CDBL Participant (Up to 99 Characters). WingsFin Ltd.
CDBL Participant         BO ID         1         2         0         6         5         1         0         0         Date:         d         d         m         y         y         y         y         y
I/We request you to open a Depository Account in my/our name as per the following details:
FIRST APPLICANT
Name in Full of Account Holder (Up to 99 Characters)  Short Name of Account Holder (Insert full name starting with Title. Mr./Mrs./Ms/Dr. abbreviate only if over 30 characters)  Title i.e. Mr./Mrs./Ms/Dr.  (In case of a Company/ Firm/ Statutory Body) Name of Contact Person:  In Case of Individual: Male  Female  Occupation (30 Characters):
Father's/Husband's Name:
Mother's Name:
CONTACT DETAILS
Address:
City:
Mobile: Fax: Email: NID:
PASSPORT DETAILS
Passport No.:
BANK DETAILS
Bank Name: Account No. Routing No.
Electronic Dividend Credit: Yes No. Tax Exempion (if any) Yes No. TIN/ Tax ID:
OTHERS INFORMATION
Residency: Resident Non Resident Nationality:
Statement Cycle Code: Daily Weekly Fortnightly Monthly Others Please Specify:
Internal Ref. No. (To be filled out by CDBL Participants):  In Case of Company:  Registration No
JOINT APPLICANT (SECOND ACCOUNT HOLDER)
Name in Full ( Up to 99 Characters):
ACCOUNT LINK REQUEST  Would you like to create a link to your existing Depository Account. Yes No
If yes, then please provide the Depository BO Account Code (8 Digits)

NO	ALC: N	EEO II	FIDO
NUI	MIN	EES H	EIKS

If Account Holder(s) wish to nominate person(s) who will be entitled to receive securities outstanding in the account in the event of the death of the sole account holder/all the joint account holder's a separate nomination Form-23 must be filled up and signed by all account holders and the nominees giving names of nominees, relationship with first account holder, percentage distribution and contact details. If any nominee is a minor, guardian's name, address, relationship with nominee has also to be provided.

# **POWER OF ATTORNEY (POA)**

If account holder(s) wish to give a Power of Attorney (POA) to someone to operate the account, a separate Form-20 must be filled out and signed by all account holders, providing the name, contact details of the POA holder and a POA document lodged with the form.

signed by all account holders, prov	viding the name, co	ontact details of t	he POA holder	and a	POA	docur	ment lo	odged	with the	form.	
TO BE FILLED IN BY THE STOCKB	ROKER/ STOCK EX	CHANGE IN CASE	E THE APPLICA	TION I	S FOR	OPE	NING A	CLEA	RING AC	COUNT	
Exchange Name: DSE Trac	ding ID 10	CSE	Trading	ID	11						
PHOTOGRAPH											
Please attach recent passport size Photograph of 1st Applicant or, Authorized Signatory in case of Limited Company only  1st Applicant or Authorized Signatory In case of Ltd.Co. Only		attach recent Photograph c or, Authorize in case c Compa	ease t passport size of 2 <sup>nd</sup> Applicant ed Signatory of Limited any only uthorized Signatory ctd.Co. Only						Photogram Signatory Co	Please cent passpraph of Aut in case of ompany on zed Signate of Ltd.Co. C	horized f Limited ly Dry
STANDING INSTRUCTIONS											
I/We authorize you to receive facsi	imile (fax) transfer i	instructions for d	elivery:	Yes 🗌		No					
The rules and regulations of the Dand I/We have understood the sa accounts. I/We also declare that the application. I/We further agree the account liable for termination and	ame and I/we agree the particulars give at any false/mislead	e to abide by an en by me/us are	d to be bound true to the bes	by the	e rules ny/our	s as a know	re in f /ledge	orce fr as on	om time the dat	e to time e of mal	for suking suk
Applicants	Name of Applica	ants/ Authorized	Signatories in o	case o	f Ltd. (	Co.		Sign	ature w	ith date	
Signature of the First Applicant/ MD/ CEO							/				
Signature of the Second Applicant/ Authorized Person/ Signatory 1						-	W/				
Signature of the Authorized Person/ Signatory 2											
SPECIAL INSTRUCTIONS ON C	OPERATION OF JO	DINT ACCOUNT									
Either or Survivor Account will be operated by		ne can operate		•		• /	rate Jo	-	vith any	one of th	ne othe
INTRODUCTION											
Introduction by an existing Account I	Holder of		<b>W</b> Deposito		<b>Fin I</b> ticipar						
I confirm the identity, occupation and	d address of the app	olicant(s)									
(Signature of the Introducer)	_	А	account ID: 1	2 0	6	5 1	0 (	0			

Authorized Signatory Accepting the Account



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CDBL Bye Laws Form 23

# **BO ACCOUNT NOMINATION FORM**

Please complete all details of only the First Named Ac			•		ent to the correspondence address
Application No.				Date	:
Name of CDBL Participant	(up to 99 Charac	ters) WingsFin	Ltd.		CDBL Participant ID
BO ID No. : 1 2 0 6	5 1 0 0				6 5 1 0 0
Name of Account Holder	(Insert full name	starting with Title	i.e. Mr./Mrs./Ms./D	r. abbreviate only if over	30 characters)
I/We nominate the follower of the death of the		•		e securities outstandi	ng in my/our account in the
1. NOMINEE/HEIRS	DETAILS				
Nominee 1 Name in Full					
Short Name of Nominee (Inse	ert full name startin	g with Title i.e. Mr./N	Mrs./Ms./Dr. abbrevia	e only if over 30 characters)	Title i.e. Mr./Mrs.
Relationship with Account	Holder				Percentage (%)
Address					
City:	Post Code	S	tate/Divison:	Country	<i>y</i> :
Telephone:		Mobile:		Fax:	
E-mail:		NID No:		Passport No	D:
Issue Place:		Issue Date:		Expiry Date:	
Residency: Resident	Non-Resident	Nationality:.		Date of Birth	
Guardian's Details (if Nom	•				
Short Name (Insert full na	ame starting with	Title i.e. Mr./Mrs.	/Ms./Dr. abbreviate	only if over 30 character	·s)
Relationship with Nominee:		Date of Birth of Minor		Maturity Date of M	Minor
Address					
City:	Post Code	S	tate/Divison:	Country	y:
Telephone:		Mobile:		Fax:	
E-mail:		NID No:		Passport No	D'
Issue Place:		Issue Date:		Expiry Date:	
Residency: Resident	Non-Resident	Nationality:.		Date of Birth	

CDBL Bye Laws Form-23

Name in Full			
Short Name of Nominee (Insert full	name starting with Title i.e. Mr./Mrs./Ms./D	or. abbreviate only if over 30 characters)	Title i.e. Mr./Mrs.
Relationship with Account Holde	er		Percentage (%)
Address			
City: F	Post Code State/Divi	son:Country	/:
•	Mobile:		
	NID No:		
	Issue Date: n-Resident Nationality:	Expiry Date  Date of Birth	
		Date of Diffi	
Guardian's Details (if Nominee i	is a Minor)		
	starting with Title i.e. Mr./Mrs./Ms./Dr.		
CHOIL HAINE (MISSICIAL HAINS O			5)
Relationship with Nominee:	Date of Birth of Minor	Maturity Date of M	Ninor I I I I
City: F	Post Code State/Divi	son:Country	/:
Telephone:	Mobile:	Fax:	
	NID No:	·	
	Issue Date:		
Residency: Resident Nor	n-Resident Nationality:	Date of Birth	
2. PHOTOGRAPH OF NOMIN	NEES/HEIRS		
Please	Please	Please	Please
attach recent passport size	attach recent passport size	attach recent passport size	attach recent passport size
Photograph	Photograph	Photograph	Photograph
Nominee/Heir 1	Nominee/Heir 2	Guardian 1	Guardian 2
	NAME		SIGNATURE
Nominee/Heir 1		<b>√</b>	
Guardian 1			
Nominee/Heir 2			
Guardian 2			
First Applicant		<b>√</b>	
Second Applicant		11//	

Nominee 2



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POWER OF ATTORNEY (POA) FORM

ONLY FOR NRB CLIENT

CDBL Bye Laws Form 20

	ONLY FOR NRB CLIENT	
	PITAL letters. Please fill all names correctly. All communications secount Holder as specified in BO Account Opening Form-02.	hall be sent to the correspondence
Application No.	Da	ate:
Name of CDBL Participant (up to 99	9 Characters) <b>WingsFin Ltd.</b>	CDBL Participant ID
BO ID No. : 1 2 0 6 5 1	0 0	6 5 1 0 0
Name of Account Holder (Insert fu	II name starting with Title i.e. Mr./Mrs./Ms./Dr. abbreviate only if over	er 30 characters)
Power of Attorney Holder's Details		
	Harry de Carrello Car	
Short Name Power of Attorney (Insert tu	Il name starting with Title i.e. Mr./Mrs./Ms./Dr. abbreviate only if over 30 charact	ters) Title i.e. Mr./Mrs.
1. POWER OF ATTORNEY HO	DLDER'S CONTACT DETAILS:	
Address		
	st CodeState/Divison:Cour	
	Mobile: Fax:	•
E-mail:	NID No: Passport	No:
2. POWER OF ATTORNEY HO	DLDER'S PASSPORT DETAILS:	
Passport No:	Issue Place: Issue Date:	Expiry Date:
2 OTHERS INCORMATION OF	F POWER OF ATTORNEY HOLDER	
Residency: Resident Non-Re	sident Nationality:	h
Power of Attorney Effective From	Т	0
Remarks (Insert reference to POA	document i.e. Specific POA or General POA, etc)	
4. PHOTOGRAPH OF POA	5. DECLARATION	
	The rules and regulations of the Depository and CDBL Participant	t pertaining to an account which are
Please	in force now have been read by me/us and I/we have understood t	he same and <b>I</b> /we agree to abide by
attach recent	and to be bound by the rules as are in force from time to time for so the particulars given by me/us are true to the best of my/our knowle	
passport size Photograph	application. I/we further agree that any false/misleading information	= = = = = = = = = = = = = = = = = = = =
(DOA Halden)	any material fact will render my/our account liable for termination a	and further action.
(POA Holder)		
Applicants	Name of Applicants / Authorized Signatories in case of Ltd. Co.	Signature with Date
POA Holder		
First Applicant		
Second Applicant		



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# APPLICATION FOR CREDIT FACILITY UNDER MARGIN RULE, 1999 BO ID: **Client Code:** 0 6 5 1 0 0 Name of the Applicant/ Client: Father's/ Husband's Name: ...... Mailing Address: Permanent Address: ..... Date of Birth: Sex Male Female Nationality: ..... NID/ Passport No.: Occupation: ..... Phone/ Mobile No: ..... E-mail Address: .... Name of the Joint Applicant: Father's/ Husband's Name: ..... Mailing Address: ..... Permanent Address: ..... Date of Birth: Sex Male Female Nationality: ..... NID/Passport No.: Occupation: ..... Phone/Mobile No: E-mail Address: In case of Company/Institution/Firm: Name of the MD/CEO: Passport/ NID No: Name of Authorized Person: Passport/ NID No: Name of Company: Registration No. with Date: Trade License No. with Date: In case of Joint/ Company Account the Account will be operated: Either or Survivor Anyone can operate Any two will operate jointly Account will be operated by...... with any one of the others. Signature of the Authorized Person/ Signature of the First Applicant/ Signature of the Second Applicant/ MD/CEO with date Authorized Person/Signatory -1 with date Signatory -2 with date

Recommended by (Signature with Seal)

Requested by (Signature with Seal)

Approved by (Signature with Seal)

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### **DEFINITIONS**

- ♦ "Margin Loan": short-term credit facilities under Margin Rules 1999
- "Exchange": the recognized Stock Exchange i.e. Dhaka Stock Exchange Limited (DSE), and/or Chittagong Stock Exchange (CSE).
- ◆ "Company": WingsFin Ltd, herein WFL.
- "TREC Holder": a TREC Holder of the exchange which is registered as a Stockdealer and Stockbroker by the Bangladesh Securities and Exchange Commission under the 'Securities and Exchange Commission' (Stockdealer, Stockbroker and Authorized Representative) Rules, 2000.
- "Broker": a TREC Holder of an Exchange (WingsFin Ltd. herein WFL).
- "Equity": the sum of margin and current market value of securities bought or held in a client's margin account.
- "Margin": the aggregate amount of costs and market value of securities deposited by a client into his margin account, not including securities which are bought and held in the margin account.
- "Securities": a financial instrument that represents ownership of equity or debt obligation in form of paper certificate or electronic records.
- "Securities Account": an account opened by the client with the broker to deposit/ buy/ sell securities with the broker.
- ♦ "Approved Securities": the securities purchased into the Securities Account which is approved by the company.
- "Marginable Securities": securities permitted by the Exchange/ Company to be bought and carried in margin account.
- "Average Net Capital": the average of net capital of the three months preceding the previous month.
- "Portfolio Value": total market value of all the stocks in the Securities Account.
- "Debit Balance": the cash amount owed by a client in his/her/their margin account.
- "Margin Call": a request from the TREC Holder to the client to provide additional margin (deposit funds or shares) to bring the equity.......% of the debit balance.
- "Consolidated Customers' Account": an account maintained by the TREC Holder with any scheduled bank only for the deposit of the funds received from and for payment of funds to and for customers. All funds received from and for the customers shall be deposited in the said account on the day of receipt thereof, or on the following day if the deposit cannot be made on the same day in the case of bank closure.
- "Market": share market under Dhaka Stock Exchange Ltd. and Chittagong Stock Exchange Ltd.

## **TERMS AND CONDITIONS**

- 01. The Client would be required to submit an application along with a minimum deposit of Tk. ...... only to the Broker for the Margin Trading Facility.
- 02. This facility granted under this account shall be a short-term facility and shall be valid at the sole discretion of the Broker and repayable on demand to the Broker at an interest rate, commission and other charges as fixed by the management of the Broker from time to time.
- 03. The "Broker" will have absolute discretion to accept or decline any security, investment facility is granted and shall reserve the right to make changes to their list of "Approved Securities" at any given moment.
- 04. Only "Approved Securities" may be used as collateral for Margin Trading. A list of the "Approved Securities", which will be updated from time to time, will be available with the broker/dealer.
- 05. When a previously approved share is later disqualified from the approved list, it will be excluded from all subsequent margin calculations.
- 06. The Client, which is a legal person shall be allowed to commence Margin Trading, only when he/she/they shall submit copies of the relevant extracts of constitutional documents (i.e., Certified Copy of Trust Deed or Memorandum and Articles of Association, as the case may be) and a resolution that authorizes the specific entity and its representatives to conduct Margin Trading.
- 07. The Client will be allowed to transfer shares to any clearing account of linked BO Account or withdrawal fund from his/her BO Account or Security Account provided that the Client's "Debit Balance" will remain below ......% of the portfolio value after the transaction.
- 08. The Client's contribution of shares will be deposited to the Client Account/ BO Account. The last traded price of the security on the preceding market day shall be used to calculate the portfolio value and should be updated on a daily basis.
- 09. A Client who operates a margin account with WFL shall authorize to mortgage, pledge or hypothecate the Client's securities or property for a sum not exceeding the "Debit Balance" in the margin account and without obligation to retain in his/her possession or control securities of like character.
- 11. Whenever the equity falls below ................% of "Debit Balance", the Company shall request the Client to provide an additional margin to bring the equity to not less than .................%.
- 13. Such additional margins must be satisfied by the deposit of cash or marginable securities within three trading days from the date of notice. The TREC Holder shall not permit any new transaction in the margin account unless the resulting equity in the account would be no less than .......% of the "Debit Balance".
- 15. WFL shall not permit the equity in a Client's margin account to fall below ................% of the "Debit Balance". Once the equity falls below this level, the TREC Holder shall have absolute discretion and without notice to the Client is authorized to liquidate the margin account including the marginable securities deposited to bring the equity to not less than .................% of the "Debit Balance".
- 16. If the "Debit Balance" reaches .................% of portfolio value due to a sudden fall in the market or any other event, without any prior notice WFL will sell out shares of any company whatsoever as it sees fit to make the "Debit Balance" regularize. Any residual shares will remain in the account and will be available to the Client.
- 17. If the Client exceeds the value of the "Debit Balance" above the stipulated limit and/or violates any other Terms and Conditions/Rules/Requirements as laid down by the "Broker" or any Regulatory Authority from time to time, the Broker shall have absolute discretion at the "Client's" risk to sell/buy any or all shares or securities of any company whatsoever in the "Client Account". In the event the portfolio value of the "Client Account" becomes inadequate to regularize the "Debit Balance", the client shall be under obligation to make a cash payment to settle any shortfall.
- 18. A Client may withdraw cash or securities from his/her account if the equity in his/her account does not fall below ......% of the "Debit Balance".
- 19. All securities transactions in a margin account his/her all be on a ready basis. The margin account shall not be used to subscribe for new issues of securities.
- 20. In the "Securities Account", if the Client enjoys margin facilities, in that case the highest limit to buy a single stock is ..................% of the portfolio value.

- 21. "Broker" will charge .................% p.a. interest on the Client's account for any debit amount, calculated on a daily basis. WFL reserves the right to increase/decrease the interest rate by giving, seven (7) trading days' notice to Client(s).
- 22. The Securities Account will be fully operated (buy/sell decisions) by the Clients at all times other than in the instance of the Company regularizing the account which is explained in clause's 11,12,13,14 and 15.
- 23. When paying a "Debit Balance" to reduce or to payoff "Debit Balance", the Client must bring funds to his/her account in either or both of the following ways:

  a) By depositing funds directly into the Client's BO Account.
  - b) By selling securities in the Client's BO Account and depositing the sales proceeds to the Client's BO Account. The proceeds will first be used to pay off the Client's "Debit Balance" and whatever remains will be returned to the Client.
- 24. Security: The shares or cash brought by the Client together with shares purchased by using the "Debit Balance" will be considered as collateral for the Margin Trading Facility. However, the shares brought by the Client to cover the Margin Requirement should meet the following criteria:
  - a) The shares should be acceptable to the broker/dealer.
  - b) The shares should be tradable in the DSE & CSE.
  - c) The shares should possess reasonable liquidity.

The broker/dealer may also take additional securities as collateral from the Client depending on the tradable demand of the share offered by the Client.

- 25. The Client hereby irrevocably authorizes the Broker:
  - a) to deal with all the Client's securities deposited in the "Central Depositary System" (CDS) from time to time and at all times whatsoever independently and at the sole discretion of the broker/dealer as long as the Client's liabilities in repayment of all such facilities remain outstanding;
  - b) to purchase and sell any such securities of the Client deposited with the "CDS" and to deal or negotiate with other Institutions, engaged in the purchase or sale of any securities on the Client's behalf and to deal with any other matters relating to the "Client/BO Account" with or without instructions given to the broker/ dealer by the Client and the Client hereby agrees that he/she shall at all times ratify and endorse such acts of the broker/dealer. The broker/dealer shall not be liable for any loss to the client directly or indirectly resulting from any such act of commission or omission;
  - c) to debit the "Client Account" for any sums or sum of money whether the purchase price of marginable securities, brokers' commissions, payments for rights and benefits in respect to marginal securities, transaction fees, commission or for any payment whatsoever;
  - d) to issue P.O. or Bank Drafts or Transfer Funds by any means to any person(s) and for any amount in respect to any transaction pertaining to the business averred herein;
  - e) to deposit Cash, Cheque or other instruments into the "Client Account";
  - f) generally, to do all things which the Client is empowered to do in respect to the "Client Account";
  - g) the Client shall indemnify the Broker in full and keep indemnified at all times against any losses, liabilities, expenses and costs whatsoever incurred by the Broker as a result of any such transactions aforesaid;
  - h) The Client further gives irrevocable Power of Attorney to the Broker to sign CDBL Pay-in/Pay-out instruction slips on behalf of the Client as and when required;
  - i) to execute sale of shares from "Client Account" and subsequently sign Pay-in instruction, if the situation arises.
- 26. The Broker agrees with the Client as follows:
  - a) Both the Broker and Client shall have the right at any time in its absolute discretion and without having to furnish any reasons therefore to close the "Client Account" by giving one month prior written notice of closure to the Client and any debit of the "Client Account" any will be adjusted as per rules 23 mentioned in the Terms & Conditions;
  - b) The Broker/Dealer shall act directly as the agent of the Client in respect to all dealings of marginable securities, and the Client shall remain absolutely liable for all dealings, negotiations and transactions entered into by the Broker on behalf of the Client;
  - c) To charge interest on all such amounts due and unpaid or spent on behalf of the Client at rates determined by the Broker with statutory levies, the Broker shall have the right to debit the "Client Account" with the same;
  - d) Where the Client is in default of payment of legal fees, stamp duty or other out-of-pocket expenses incurred by the Broker, the Broker shall have the right and discretion to recover such expenses from the Client by debiting the "Client Account";
  - e) This agreement shall be binding on the parties hereto, their successors, heirs, executors, administrators, assigns or legal representatives;
  - ) These Terms and Conditions shall not be altered, amended or modified except in writing by the duly authorized representative of each party hereto;
  - g) This agreement shall be governed and construed by the laws of the Peoples' Republic of Bangladesh;
  - h) The Client does hereby agree and irrevocably holds the Broker indemnified, safe and harmless against any losses, suits, claims and damages that the Broker shall or may have caused, sustained, incurred, or suffered by reason in maintaining the Client's accounts and using the Margin Trading facilities in any manner whatsoever and/or acting on the instructions or requests or advice made or forwarded by way of telephone messages or facsimile massages and/or by accepting electronic messages exchanged.

Nominee: In the event of the death of the joint account holder, the survivor, and on the death of sole account holder, the nominee or successor shall be the beneficiary of the transactions.

**Governing Laws:** All transactions shall be subject to the Rules and Regulations of the Securities and Exchange Commission of Bangladesh, DSE, CSE and other prevailing Laws and Regulations of Bangladesh and in particular the authority hereinafter granted by the Client to the Broker.

I/We hereby declare, the information given is true and correct. I/We also read and understood the Terms and Conditions of the account and agree to abide by the same.

Signature of the First Applicant/ MD/CEO with date	Signature of the S Authorized Person/S		Signature of the Authorized Person/ Signatory -2 with date
Witnessed by:		Witnessed by:	
Signature		Signature	
Name:		Name:	
Address & Phone No.:		Address & Phone No.:	
Client Code	FOR OFFIC	E USE ONLY	Date: d d m m y y y y
BO ID 1 2 0 6 5 1 0 0			
Requested by (Signature with Seal)		(Signature with Seal)	Approved by (Signature with Seal)



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# **KYC PROFILE FORM**

(under FORM-II)

Type of Account:

Single

Joint

Company

BO II	D No.: [	1 2 0	6 5	5 1	0	0							Тур	e of A	Accou	ınt:	Cas	sh		Mar	gin		NRE	3
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Occu	pation:																							
Nam	e of Joint	Account	Holde	r:																				
Occu	pation:																							
Nam	e of MD/	CEO (in c	ase of	f Con	npai	ny/Ins	stituti	on/Fi	irm).															
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Client Code:



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SI.	Nature of Documents	Number	Photo	copy	Applicable for
			Yes	No	
06.	Bank Account with supporting documents				Single/Joint Account or NRB or NR or Foreigner
07.	NID/Birth Certificate/ Passport				Nominee
08.	NID/Birth Certificate/ Passport				Authorized Person
09.	Incorporation/ Reg. Certificate				Company/ Institution/ Firm
10.	Articles of Association				Company/ Institution
11.	Memorandum of Association				Company/ Institution
12.	Trade License				Company/ Institution/ Firm
13.	TIN				Company/ Institution/ Firm
14.	VAT Registration				Company/ Institution/ Firm
15.	Particular of Directors/ Form XII				Company/ Institution/ Firm
Com	ments (if any):				
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	count Opening Officer/ ch In-Charge/BAMLCO	Dr & Settlement			Compliance Officer
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Sigr	nature of the CAMLCO				

with date and Seal



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E	LECTRONIC FUNDS TRANS	FER (EFT) ENROLLMENT FO	ORM
Client Code:		Date:	d d m m y y y y
BO ID No.: 1 2 0	0 6 5 1 0 0		
Client Name:		Phone/ Mobile:	
•		ving Bank Account, which is also reg ing below, I/We agree to enroll in th	
Bank Name:			
Bank A/C No.:			
Branch Name:			
Routing Number:			
I/We certify that I/We am/ conditions that follow:	are the owner or authorized signator	y for this account. I/We have also rea	d and agree to the terms and
Signature of the First Applicant/MD/CEO with date	Signature of the Second Applicant/ Authorized Person/ Signatory-1 (if any) with date	Signature of the Authorized Person/ Signatory - 2 (if any) with date	Signature of the Introducer with date
Signature Verified by			

# **TERMS AND CONDITIONS**

- 1. WFL will transfer funds electronically from the Client's Trading Account to Client's Bank Account mentioned on this EFT Enrollment form along with his/ her/ their BO Account.
- 2. It is sole responsibility to ensure that bank account information is accurate. WFL is not responsible for any payment processing errors or fees incurred in the case of inaccurate account information provided by the Client.
- 3. WFL reserves the right to reject the EFT Enrollment Application Form.
- 4. Any changes made to this EFT Enrollment Form must be updated in person at the WFL office. This may require a new EFT enrollment application process.
- 5. Terms and Conditions may be changed without prior notice due to the amendment of relevant regulatory policy by the pertinent government regulatory body such as the Bangladesh Securities and Exchange Commission.
- 6. EFT services will be discontinued if:
  - The registered account is not active or closed.
  - The account holder is not the signatory of the registered account.
- 7. All questions and concerns regarding the EFT service should be directed to the management of WingsFin Ltd.
- 8. WFL is not responsible for technical errors or difficulties beyond WFL's control that may arise during the Electronic Funds Transfer (EFT) process.



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# **VALUE ADDED SERVICES**

	Client Code:
	Client's Name:
	BO ID:
	E-mail ID:
	Mobile Number:
	Internet Trading:
	DSE
	CSE
	Order Management System
	SMS Service
	E-mail Service
	TERMS AND CONDITIONS
1.	User must maintain the credentials i.e. Login ID and Password for the value added services strictly. WFL will not take any responsibility in case of any hacking or disclosures.
2.	Orders placed online for internet trading cannot be replaced over phone, by email, verbally, SMS or any other mode of communication.
3.	The user must maintain internet transactional compliance. WFL will not be liable for any unauthorized and non-compliant transactions made by user.
4.	User cannot have internet trading accounts for both the exchanges.
	For SMS services, user must be a subscriber of a conventional mobile operator in Bangladesh.
	All SMS service charges are based on mobile operator's fees and conditions.
	In case of email services, user must add company email to trusted contacts in order to avoid emails sent by the company going into user's junkmail box.
8.	The Order Management System will adhere to OMS vendor's Terms and Conditions whenever applicable.
	Signature of the First Signature of the Second Applicant/ Signature of the Authorized Person/ Signature of the Introducer Applicant/MD/CEO Authorized Person/ Signatory-1 Signatory - 2 (if any) with date with date with date

Checked by (Signature with Seal)

Processed by (Signature with Seal)

Approved by (Signature with Seal)



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	PAY IN	Transfer Form	Date: d d	m m y y y y
Please complete all details in CAPITAL le First Named Account Holder's correspond			 /. All communication	shall be sent only to the
1. Transferor Details				
	) ID 1 2	0 6 5 1 0	0 0	
BO Name :				
ISIN		Issuer Co	mpany	Pay in quantity
2. Transferee Details				
Trading ID/Broker Code 2 9 9			Name of Broke	er : WingsFin Ltd.
3. DECLARATION				· ·
The rules and regulations of the Depository read by me/us and I/we have understood the time to time for such accounts. I/We also de on the date of making such application. I/We of any meterial fact will render my/our accounts.	e same and I/w clare that the p e further agree	e agree to abide by ar articulars given by me that any false/mislead	nd to be bound by the /us are true to the bes ding information given	rules as are in force from st of my/our knowledge as
	f Applicants/A	uthorized Signature I	n Case of Ltd. Co.	Signature with date
First Applicants				
Second Applicants				
3rd Signatory (Ltd. C0. Only) POA Holder				
4. To be filled by the DP				
BO ID (Broker Clearing A/C)  1 2 0 6 5 1 0 0  DD ID (C. 5 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Internal Ref. No		Quantity
DP ID: 6 5 1 0 0			_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>9</b> <u></u>
The pay in Quantity has successfully been to Name of the CDBL Participant	ransferred to th	ne broker's clearing A/C	)DP	Signature
		Se	tup Date (DD/MM/YY	YY)

These fields should be checked and matched with system-generated information.



TREC # 299, BSEC Reg. # 3.1/DSE-299/2022/609

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TREC Holder No. 299, Dhaka Stock Exchange Ltd. **Full Service Depository Participant (DP)** Under License From BSEC & CDBL, License No. 3.1/DSE-299/2022/609 (BSEC)

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Authorized Signature of WingsFin Ltd.



TREC # 299, BSEC Reg. # 3.1/DSE-299/2022/609

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TREC Holder No. 299, Dhaka Stock Exchange Ltd. Full Service Depository Participant (DP)
Under License From BSEC & CDBL, License No. 3.1/DSE-299/2022/609 (BSEC)

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Authorized Signature of WingsFin Ltd.



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Client Code: BO ID:	1 2 0	6 5	1 0 0				
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First Accou	nt Holder/ N	MD/ CEO					
Joint Accou		gnatory 1					
Authorized	Person/ Sig	gnatory 2					
Power of A	ttorney						
Nominee 1							
Nominee 2							
Special Ins	tructions (if	any)					
Authoriz	ed Officer				 Ani	proved by Au	uthorized



Yousuf Chamber 3rd Floor, 20 Dilkusha C/A, Dhaka- 1000

# **HEAD OFFICE**

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