

12. Expected Monthly Value of Investment

☐ Less than LKR 100,000

☐ LKR 100,000 - LKR 500,000

☐ LKR 500,000 - LKR 1,000,000

☐ LKR 1,000,000 - LKR 2,000,000

☐ LKR 2,000,000 - LKR 3,000,000

☐ LKR 3,000,000 - LKR 4,000,000

☐ LKR 4,000,000 - LKR 5,000,000

☐ LKR 5,000,000 - LKR 10,000,000

☐ Over LKR 10,000,000

13. Sources of Funds

☐ Salary/Profit Income

☐ Investment Proceeds/Savings

☐ Commission Income

☐ Sales & Business Turnover

☐ Contract Proceeds

☐ Membership contribution

☐ Sale of Property & Asset

☐ Donations / Charities (Local / Foreign)

☐ Export Proceeds

☐ Family Remittances

☐ Gifts

Others: _____

14. Purpose of Opening the Account

☐ Savings/Investments

☐ Equity/Debt Security Transactions

Other: _____

15. Are you a Politically Exposed Person (PEP)? ☐ Yes ☐ No

Definition of a PEP

- i. An individual who is or has been entrusted domestically or by a foreign country with prominent public functions
- ii. An individual who is related to a PEP either directly (consanguinity) or through marriage or similar (civil) forms of partnership
- iii. An individual who is closely connected to a PEP, either socially or professionally

16. Are you a US person under the Foreign Account Tax Compliance Act (FATCA) of the US?

☐ Yes (If yes, FATCA declaration has to be submitted along with the application form)

☐ No (In the event if I/We become a US person under FATCA of US, I/ We do hereby undertake to inform the said fact to the Participant immediately)

Under the Foreign Account Tax Compliance Act ("FATCA") the following criteria may classify a customer as a "US Person"

- i. A Citizen of USA (including an individual born in the USA but resident of another country, who has not renounced US citizenship)
- ii. A lawful resident of the USA (including a US Greencard holder)
- iii. A person residing in the USA
- iv. A person spends approximately 180 days within 03 years (not continuously) in the USA
- v. US corporates, estates and trusts
- vi. Any entity that has a linkage or ownership to US or US territories

2. Bank Details

Account 01

Account Title : _____

Account No. : _____

Bank Name : _____

Branch Name : _____

Account 02

Account Title : _____

Account No. : _____

Bank Name : _____

Branch Name : _____

Account 03

Account Title : _____

Account No. : _____

Bank Name : _____

Branch Name : _____

*Provide proof of Bank Statements for verification.

Payment Instructions - Maturity Proceeds Interest

SLIPS/RTG transfer to any of the above Bank Accounts

☐ Transfer of Funds for settlement between Capital Alliance Group Companies

3. Name of Person(s) Authorized to Give Instructions

Signing Instructions:

Primary Holder	<input type="text"/>
Name of Portfolio Manager	<input type="text"/>
Name of Trustee/Custodian	<input type="text"/>

4. Consent & Declaration

Enrollment for real-time notification in the Central Depository System of Lanka Secure

Please send notifications to the below mentioned

Please tick the Notification Mode: ☐ E-mail ☐ SMS ☐ E-Mail & SMS

I do not wish to receive real-time notifications from the Central Depository System: ☐

E-Mail Address:	<input type="text"/>
Mobile Number:	<input type="text"/>

Client Signature

Date

Consent to obtain verification of the client's identity with the Department of Registration of Persons

You consent to the verification of your identity and authentication of any data or document furnished by you to us (including but not limited to your name, address, date of birth, National Identity Card number and image) with the Department of the Registration of Persons via any IT system or facility maintained by the said Department.

Client Signature

Date

Email Indemnity for instructions given by Clients

I/We the undersigned ("Client") hereby request Capital Alliance PLC ("Company") to accept and act upon my/our instructions sent via electronic mail address set out herein ("Instructions") with regard to any transaction notwithstanding the fact that the identity of the sender cannot be verified by the Company.

The Company shall not be liable to the Client or any third party for, and the Client shall indemnify the Company at all times against, any loss, damage, claim, expense or liability, whether involving fraud or not, and whether arising in contract, tort or otherwise, howsoever in connection with any Instruction which appears to originate from the Client or its authorized representative. Client is responsible for ensuring sufficient safeguards are in place to prevent any unauthorized Instructions being sent from the client's systems.

Until such time as the Company acknowledges the Instructions by return mail, the Instructions shall not be deemed delivered and the Company shall have no liability for errors delays or losses caused as a result thereof. The Company has absolute discretion to reject/not act on an Instruction and request the Client to provide a written confirmation duly signed by the Client.

E-Mail Address:	<input type="text"/>
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Client Signature

Date

Risk Disclosure

I/We hereby declare that I/We understand that my/our investments are subject to market and/or interest rate risks and volatility and the Capital Alliance Group shall not hold any responsibility or liability for the same.

Terms & Conditions

I/We hereby declare that the above information given by me/us is true and correct and agree to give notice in writing of any change of particulars given

I/We hereby give consent to open a CDS Account & FIS Account and declare that I/we have read and understood the contents of the Customer Agreement/Master Repurchase Agreement.

(Please strike off as applicable to the product subscribed to)

Client Signature

Date

5. Documentation

Documents Required for KYC Verification

1. A copy of the National Identity Card/Valid Passport Copy
2. A valid utility bill (within three months of issue) if the permanent address differs from the address stated in the NIC.
3. A valid bank statement proof (within 03 months of issue), with Name, Account and Bank Name and Branch clearly visible
4. A visa copy of Foreign Resident applicants
5. Dual citizenship certificate (if applicable)

Documents Provided for KYC Verification

Identification Documents

- ☐ National Identity Card
- ☐ Passport (for foreign individuals)
- ☐ Driving License
(an affidavit is required confirming that both NIC/Passport are not available)

Proof of Residence

- ☐ National Identity Card
- ☐ Bank/Credit Card Statement
- ☐ Telephone Bill
- ☐ Electricity/Water Bill
- ☐ Gramasevaka certificate certified by the Divisional Secretariat

Any other document (please specify):

6. Office Use Only

I) Risk Categorization

- a) Verification of Department of Registration of Persons ☐ Yes ☐ No
- b) Online screening ☐ Yes ☐ No

To be completed by Customer Support Executive conducting the abovementioned checks

Signature Name Date

II) Risk Profiling

- ☐ Low Risk ☐ **Medium Risk ☐ **High Risk

To be completed by the officer marking the risk categorization

Signature Name Date

III) Client Identity

Customer came in person to open the account: ☐ Yes ☐ No

I hereby confirm that to the best of my knowledge and belief the information given herein by the applicant is true and correct, the applicant is financially stable to maintain a;

FIS Account ☐ Investment Advisor Signature Date
D D M M Y Y Y Y

Verified By Approved By System Updated By
Signature :
Name :
Date :
D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y