

Client's Information

(Corporate/Sole Proprietor/Partnership Account)

Corporate Information

Name of Client (in English)				
Name of Client (in Chinese, if any)				
Private Ltd Co <input type="checkbox"/>	Public Ltd Co <input type="checkbox"/>	Sole Proprietor <input type="checkbox"/>	Partnership <input type="checkbox"/>	Others <input type="checkbox"/> _____
Place of Incorporation			Date of Incorporation	
Certificate of Incorporation No.			Business Registration No.	
Nature of Business				
Registered Address				
Business Address (if different)				
Tel No.			Fax No.	
E-mail				
Correspondence (choose one only, all communications, including client statements, will be sent to): <input type="checkbox"/> E-mail address [please complete "Client's Consent (Electronic Communication)" of this form] <input type="checkbox"/> Registered Address <input type="checkbox"/> Business Address <input type="checkbox"/> Others: _____				

Related Persons

Are your 35% or more of the voting rights in controlled by another margin client(s) of us? (Please "v" where appropriate)		
<input type="checkbox"/> No		
<input type="checkbox"/> Yes, details as below:		
<i>Account Number</i>	<i>Name of Account Holder</i>	<i>Relationship with Account Holder</i>
_____	_____	_____
_____	_____	_____

Electronic Stock Trading Services – Internet Services

You request us to provide internet services for your account opened with us. You agree that you shall be bound by the Terms in Connection with Internet Services set out in Appendix 2.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Persons authorized to operate the account (the "Authorized Persons")

Name	HKID/Passport No.	Telephone No.	Specimen Signature

Signing Instruction:

The signing instruction for Authorized Person is: (Please specify e.g. signing singly, any two jointly, or wholly etc.)

Directors

Name	HKID/Passport No.	Nationality

Shareholders

Name	HKID/Passport No.	Nationality	% of Shareholding

Financial Position (in HK\$)

Source of Fund	
Authorized Share Capital	Issued Share Capital
Turnover	Gross Profit/(Loss) for the last year
Net Equity	Net Profit/(Loss) for the last year

Investment Objectives (please tick as appropriate, you may tick more than one item)

<input type="checkbox"/> Income	<input type="checkbox"/> Capital Gain	<input type="checkbox"/> Short Term Growth
<input type="checkbox"/> Long Options	<input type="checkbox"/> Write Covered Options	<input type="checkbox"/> Write Uncovered Options
<input type="checkbox"/> Hedging	<input type="checkbox"/> Options Speculation	<input type="checkbox"/> Options Strategic

Investment Experience

	Stocks	Warrants	Options	Futures
No. of Year(s)				
No. of Transaction per Year				
Typical Transaction Size (in HK\$)				

Derivative Products Experience

<p>Have you traded 5 or more transactions in any derivative or structure products whether traded on exchange or not, within the past 3 years?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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Bank Reference

Name of Bank		
Account Number		
Address		

CLIENT'S DECLARATION

I/We confirm the information provided above is true, complete and correct. Our company will notify your company of any material changes to the above information.

Client's Name(s)	
Client's Signature(s)	
Date	

Please attach certified copies of the following documents:-

- Memorandum and Articles of Association
- Certificate of Incorporation
- Certificate of Business Registration
- Hong Kong Identity Card or Passport of all Authorized Persons; Directors and Shareholders
- The most recent Annual Return