



# Account Opening Application Form

## For Individuals

29 I. Chavchavadze Ave.  
0179 Tbilisi, Georgia  
Tel: +995 322 197745  
E-mail: [sales@heritagesecurities.ge](mailto:sales@heritagesecurities.ge)

## Important Notice

As a professional brokerage institution observing the applicable laws, by-laws, rules, and regulations adopted by state authorities, domestic and international regulatory agencies and professional associations, we are required to protect our clients' interests, for which purpose we believe our primary tasks are to understand our clients, the nature of their business, source of funds, and to ensure that we understand fully their investment objectives and specific investment experience.

Thus, you certify that all statements made in this Account Opening Application Form (the "Application") and all information, documentary or otherwise, provided to us (the "Information") are complete, true and accurate. You agree to be fully liable for all such Information, and do not object that the Information collected be also used to confirm your business reputation and solvency according to practices applicable in international securities markets.

The Information provided in this Application shall be kept confidential and shall not be disclosed by us to a third party without your consent other than by explicit requirement under the applicable laws. You agree and acknowledge that if required to disclose any such Information, we shall, without your additional consent, submit the Information only to the extent required by the appropriate regulations and only to the person stated in such regulations.

Please sign below to confirm your acceptance and agreement to the conditions stated above.

Signature \_\_\_\_\_

This General Information is to be completed by all clients wishing to open a Brokerage Account with us.  
Please fill out this questionnaire COMPLETELY using clear capital letters.

PLEASE NOTE! Completion of this Account Opening Application Form does not impose any obligation on us to open a Brokerage/Custody Account for you. This information is necessary for us to accomplish our due diligence in determining whether we may establish an Agency service relationship with you.

## Part I Account Opening Information

Date: \_\_\_\_\_ , \_\_\_\_\_

**Please fill in ALL the fields**

### I. Identification and Client Information.

**Client:**

\_\_\_\_\_

**Registered Address / Place of residence:**

\_\_\_\_\_

**Mailing Address (if different from Registered Address):**

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **URL:** \_\_\_\_\_

**Passport/Personal ID Card Details:**

\_\_\_\_\_

Number

Series

Issue Date

Issuing Authority

\_\_\_\_\_

Date of Birth

\_\_\_\_\_

Place of Birth

**Georgian Tax ID (if available):** \_\_\_\_\_

**Are you a resident of Georgia?**

Yes  No

If No, please specify the country of residence \_\_\_\_\_

**Do you hold a Green Card of the USA?**

Yes  No

**Do you have the USA Taxpayer Identification Number (TIN)?**

Yes  No

If Yes, please specify the TIN \_\_\_\_\_

**What is your primary occupation** (please include company name, if applicable, and address)?

\_\_\_\_\_

\_\_\_\_\_

**Are you involved in any pending litigation in Georgia, or have you ever been involved in any litigation, disputed accounts, or have you had any unresolved matters with a Georgian or other broker, investment firm, custodian, stock exchange or investment advisor?**

Yes       No

If Yes, please provide details

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**Have you, or a firm in which you were a senior officer, ever been convicted of a criminal offence?**

Yes       No

If yes, please describe briefly

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## II. Settlements and Account Information

**Bank Settlement/Wiring Instructions:**

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## III. Information about Non-Resident Politically Exposed Person (PEP)

**Have you (or your family member or a person affiliated/having business relationship with you) been politically exposed person for last 1 (one) year?**

Yes       No

**If Yes, please check and fill out the relevant field below:**

Government Official/Important Political Figure \_\_\_\_\_  
Please indicate the position

PEP Family Member \_\_\_\_\_  
Please indicate: spouse, son/daughter and his/her spouse, mother/father, brother/sister

Person Affiliated/Having Business Relationship with PEP \_\_\_\_\_  
Please indicate the type of affiliation/business relationship

## IV. Authorizations

**Person(s) authorized to give us trade and transfer orders (if different from the account holder):**

1. Name:

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Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ URL: \_\_\_\_\_

Passport/Personal ID Card Details:

_____	_____	_____	_____
Number	Series	Issue Date	Issuing Authority
_____	_____		
Date of Birth	Place of Birth		

Acting as authorized by the account holder (please attach duly executed evidence of authorization):

\_\_\_\_\_

**V. Required KYC Documentation\* for Individuals**

- Copy of the information page of your passport or other ID documents containing your photo and signature
- Copy of the Georgian Taxpayer's Certificate\*\*

*\*Documents should be duly notarized and apostilled.*

*\*\* If the client doesn't have a Georgian Taxpayer's ID, Heritage Securities is required by Georgian Law to withhold from the client capital gains tax and other applicable taxes upon completion of transaction*

**Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Part II Additional Information

**Check only those items that are applicable**  
**In order to better serve your needs please fill in the fields below**

### V. Investment Objectives, Qualifications and Experience

**Are you employed by a firm that has as its primary business dealing in investments or securities?**

Yes  No

If Yes, which firm?

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**Is your occupation (as stated on p.3) your primary source of income?**

Yes  No

If No, what is your primary source of income?

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**Have you been in contact with an employee or employees of our company, or any of its affiliated companies?**

Yes  No

If Yes, please provide the name

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**How would you characterize your experience with securities?**

extensive  moderate  little  no experience

**Which of the following represents your investment objectives or needs?**

long-term investment  investing for capital gains  managing liquidity  
 short-term speculation  investing for current income

**Have you ever invested in any of the following instruments or activities? (check those that apply)**

<input type="checkbox"/> publicly-traded equities	<input type="checkbox"/> commodities contracts
<input type="checkbox"/> promissory notes	<input type="checkbox"/> money-market funds
<input type="checkbox"/> exchange-traded options on underlying securities or indices	<input type="checkbox"/> life or property insurance
<input type="checkbox"/> exchange-traded futures on underlying securities or indices	<input type="checkbox"/> repos
<input type="checkbox"/> limited partnership interests	<input type="checkbox"/> stock borrowing and lending
<input type="checkbox"/> mutual funds	<input type="checkbox"/> margin trading
<input type="checkbox"/> publicly-traded corporate debt	<input type="checkbox"/> privatization/auction participation
<input type="checkbox"/> currencies contracts	
<input type="checkbox"/> government or municipal bonds _____	

Please indicate

other instruments

**What amount do you intend to invest?**

From (USD):  1,000  50,000  100,000  500,000  1,000,000  More  
To (USD):  50,000  100,000  500,000  1,000,000  10,000,000  More

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**What is the anticipated average size and holding period of your positions in securities?**

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**What counterparties are you working/have you worked with?**

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## VI. Investment Strategy and Business Information

Are you acting as a nominee/agent/trustee for another individual, group or entity?

Yes  No

If Yes, please identify

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Do you hold an account or a beneficial interest in an account held with us, or any of our affiliated entities, under another name?

Yes  No

If Yes, please provide details

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## Customer's General Representations and Warranties.

### Risk Disclosure Statement

#### Consent to Indemnity

The Customer hereby agrees to indemnify us and any of our affiliated entities and subsidiaries, including their directors, officers and managers **against any liability and reimburse us for any loss or damages** that may arise in connection with decisions that may be made based on the Information provided by the Customer, or as a result of the Information being incomplete, untrue or inaccurate.

#### Risk Disclosure Statement

The Customer acknowledges that investing in Georgian securities involves certain considerations and a high degree of risk not usually associated with investing in other capital markets. Such risks include, but are not limited to, greater political risks of expropriation, nationalization, confiscatory taxation, and political, social and economic instability, greater likelihood of currency devaluation and more pronounced currency exchange rate fluctuations, certain policies that may restrict profitability of investment opportunities, including without limitation, restrictions on investing in businesses deemed to be sensitive to relevant national interests.

Name: \_\_\_\_\_

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Signature: \_\_\_\_\_

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Date:

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