ACCOUNT OPENING FORM

| Account Holder | | |
|------------------|----------|--------|
| Client Code | | |
| BO ID No. | 12022200 | |
| Address | | |
| Joint A/C Holder | | |
| Phone | 1 | Mobile |
| Fax | • | E-mail |



REQUIRED DOCUMENTS FOR OPENING CUSTOMER AND BO ACCOUNT

| Individ | dual Account: Single & Joint |
|---------|--|
| | 3 Copies recent passport size photograph of account holder(s) attested by the introducer |
| | 2 Copies recent passport size photograph of nominee duly attested by the account holder |
| | If Nominee is minor, 1 Copy recent passport size photograph of the guardian attested by the account holder and |
| | photocopy of birth certificate of the nominee |
| | 2 Copies recent passport size photograph of the authorized person and PDA attested by the account holder |
| | Bank Statement for last 1 month/Bank certificate of both single & joint account holders |
| | Photocopy of National ID card or valid Passport for single & joint account holder, Nominee and authorized person |
| In cas | e of NRB & Foreign Nationals following documents are mandatory along with the above documents |
| | 3 Copies recent passport size photograph of account holder(s) attested by the introducer |
| | Photocopy of Passport (with valid visa) for Account Holder & Joint Account Holder, Nominee and Authorized Person |
| | Foreign Currency (FC) Bank account certificate containing name of the applicant, name of father & mother |
| | and Bank account number |
| | Photocopy of service agreement with the employer/work permit/residence permit/business documents |
| | 1 Copy recent passport size photograph of the Nominee(s), if any (attasted by account holder) |
| | Tax clearance certificate (in case of foreign Nationals) |
| Institu | ational Account: Public/Limited companies, Partnership/Proprietorship Firms, Trust and Fund Account |
| | Duly attested Photocopy of Memorandum & Articles of Association certified by RJSC |
| | Duly attested Photocopy of Certificate of incorporation |
| | Trade License |
| | TIN Certificate |
| | Board Resolution regarding opening of the account and its operation |
| | 2 Copies recent passport size photograph of the CEO/Managing Director, attested by the Chairman |
| | Ouly attested Photocopy of National ID card or valid Passport of the CEO/Managing Director |

Note : The account opening form should be filled in BLOCK LETTERS



Photograph of 1st Account Holder Photograph of Joint Account Holder

| Date: | ACCOUNT OPENING INFORMATION FORM |
|---|--|
| Customer Accounts No. | BO ID No. 1 2 0 2 2 2 0 0 |
| Account Type: Cash | NRB: Yes ☐ No ☐ Status: Induvidual ☐ Joint ☐ |
| Name of the Account Holder: | Joint Account Holder's Name: |
| Father's Name: | Father's Name: |
| Mother's Name: | Mother's Name: |
| Spouse's Name: | Spouse's Name: |
| Date of Birth: Sex: Male Female | Date of Birth: Sex: Male ☐ Female ☐ |
| Occupation: Nationality: | Occupation: Nationality: |
| Present Address: | Present Address: |
| 1 | |
| Phone No: Cell: | Phone No: Cell: |
| E-mail: Fax: | |
| Permanent Address: | Permanent Address: |
| National ID No. : | National ID No. : |
| Passport No : Issue Date: Expiry Date: | |
| Father's/Spouse's Name: Date of Birth: Address: Female Female | Nationality: Authorized Person |
| Phone No: E- | mai: |
| Nominee Details | Nominee 2 |
| Nominee 1 Name and Address | Nominee 2 |
| Date of Birth | Photograph of |
| National ID No. | Nominee(s) |
| Relation | |
| Percentage% | |
| Whether the Account Holder or Joint Account Holder is an Officer or Director of a If yes, Name & Address of the Stock Exchange/ Listed Company | |
| In case of joint Account, the Account will be operated | Jointly Anyone can operate RO ID No: |
| warne α Address of the Person introducing the Account Holder: | BO ID No: |
| Detail Spreame of company Dear & Springer of S | Lah (Greek Pareton of Gay) Date & Hamstern of Atomice Profess |
| Once di Signocure di Sonsi Account Protess | Names 2 Simplifie Avillance Signatory editioning the Assourt |



TERMS AND CONDITIONS FOR OPENING A BROKERAGE CUSTOMER ACCOUNT

DECLARATION

I/we the undersigned whose information is given in the Customer Account Opening Information Form hereby request to be registered as a client of Meghna Bank Securities Ltd. and to open a brokerage customer account in my/our/company name. I/we further agree and confirm that the account hereby requested to be opened by me/us shall be held and governed by the terms and conditions of this agreement as provided herein after and as may be modified from time to time by Meghna Bank Securities Ltd. (MGBSL).

TERMS AND CONDITIONS

Instructions: A written instruction shall be given to MGBSL from time to time to purchase and/or sell Securities (which shall mean and include shares, bonds, debentures, mutual funds etc.) on behalf of the account holder. On receipt of such instructions along with a cash deposit or delivery of securities, MGBSL shall, so far as MGBSL considers it reasonably practicable, purchase and/or sell Securities in accordance with those instructions, provided always that (i) any such dealings do not contravene any applicable laws or regulations, (ii) MGBSL shall have an absolute discretion to acceptor reject purchase/sell instructions and (iii) account holder's instruction shall include the following details:

- The name of the Securities
- Quantity
- · Price with notification of limit or discretion
- The duration of the order
- The nature of the lot (i.e. scrip size) for sale or the desired format for purchase order (See Note)
- The order should specify completion formats of :
 - o All or partial fill with minimum trade value or number of shares
 - o Mode of execution i.e. DVP (delivery versus payment)/NON DVP (non delivery versus payment)

(Note: The number of shares constituting a "market lot" may change. Sellers must include the exact format of their holding. This has a direct impact on market pricing given the predominantly retail nature of the market. Trades may fail where non-agreed lot sizes are delivered.)

Joint Accounts: If this is a joint account, unless the account holders notify Meghna Bank Securities Ltd. otherwise and provide such documentation, as Meghna Bank Securities Ltd. may require, the brokerage customer accounts(s) shall be held by the account holders jointly with rights of survivor ship (payable to either or the survivor). Under these terms and conditions each joint account holder irrevocably appoints the other as attorney in fact to take all action on his or her behalf and to represent him or her in all respects in connection with this agreement. Meghna Bank Securities Ltd. shall be fully protected in acting but shall not be-required to act upon the instruction of either of the account holder, who shall be liable, jointly or severally, for any amounts due to Meghna Bank Securities Ltd. pursuant to this agreement, whether incurred by either or both of the account holders. Unless and otherwise it is mentioned-in case of joint account both the account holder will be treated as equal partner and in case of death and any other accident the account balance will be divided equally to the joint account holders or their respective nominees if any.

Jumbo and Market Lots: When an account holder wishes to sell stock, he/she must inform Meghna Bank Securities Ltd. as to the format of the lot being sold, for example 5000 shares in 10's and 2000 in 5's (Jumbo lots are difficult to split with the company and so face a considerable discount to market price)

Risk: The account holder understand(s) that the stock market is a rapidly changing market and that there is an inherent risk in incurring loss in share dealings.

Limit Orders: While Meghna Bank Securities Ltd. will endeavour to purchase or sell the Securities within the limits of the prices that may be notified by the account holder. Meghna Bank Securities Ltd. does not guarantee or assure that the transactions will be materialized with on such notified limits. Meghna Bank Securities Ltd. will always endeavour to obtain the best price.

Dhaka & Chittagong Stock Exchange Rules: All transactions duly concluded through and recognized by the Dhaka Stock Exchange Limited (hereafter DSE) and Chittagong Stock Exchange Limited (hereafter CSE) are governed by the respective Rules of CSE & DSE relating to trading and settlement in particular and will be binding on both the parties concerned.

Payment and Disclosure: Meghna Bank Securities Ltd. shall not be obliged to make any payment on behalf of the account holder. Meghna Bank Securities Ltd. may disclose information regarding the account holder or his/her dealings in relation to this agreement to any department of any government or public body upon request, whether or not such request is in fact legally enforceable, and Meghna Bank Securities Ltd. will not be liable in any way to account holder for so doing.

Cancellation Provisions: Meghna Bank Securities Ltd. is authorized, in its discretion, should the undersigned die or should Meghna Bank Securities Ltd. for any reason whatever deems it necessary for its protection, without notice, to cancel any outstanding orders in order to close out the accounts of the account holder, in whole or in part, or to close out any commitment made on behalf of the account holder.

Indemnity: In the event of a default, or act committed by Meghna Bank Securities Ltd. as a broker/TREC Holder of the DSE & CSE, the account holder shall be indemnified if and only as provided by the Rules and Regulations of the DSE & CSE.

Confirmations and Statements: Meghna Bank Securities Ltd. shall use its best endeavours to provide the account holder with (a) written confirmation of each transaction it has effected on instructions; and (b) contract notes (in such form as Meghna Bank Securities Ltd. shall determine) setting forth (i) details of the trade date, value date, settlement date, quantity, price, commission rate and DSE Howla number or CSE equivalent provided also that the account holder does hereby

agree and undertake to confirm in writing beforehand of all our instructions. and any other related expenses and charged that may from time to time be applicable. Every transaction concluded through and recognized by the DSE or the CSE is subject to transaction levies or other fees imposed by the DSE & CSE. The account holder understands that the rate of commission may be changed from time to time. Account Balance: The client shall always maintain a minimum cash balance of Tk. 1000.00 (Taka One Thousand only) in their B0 Account. Set-off: Meghna Bank Securities Ltd. shall be entitled to, in respect of all communications costs, charges of expenses, set off from any monies from time to time held by Meghna Bank Securities Ltd. for the account holder and if such monies are insufficient for the purpose. to sell any Securities held by Meghna Bank Securities Ltd. or any of its agents on behalf of the account holder. Termination: This agreement will stand terminated; 7 days prior, written instruction of the Account Holder to Meghna Bank Securities Ltd. terminating this agreement or on the written instruction of Meghna Bank Securities Ltd. to the Account Holder for termination this Agreement. Termination shall not absolve the parties from completing accounts and adjusting any outstanding dues. Assignment: The benefits/rights and burdens/obligations of this Agreement is capable of assignment by both the account holder and Meghna Bank Securities Ltd. without the consent of the other but the notice of assignment must be given to the other in writing. Force Majeur: Meghna Bank Securities Ltd. shall not be liable for any loss, damages, expenses, costs or otherwise resulting directly or indirectly from any Government restriction, exchange ruling, suspension of trading, war, strike, national disaster or any other event or circumstance beyond its control. Forged Shares: Meghna Bank Securities Ltd. shall not be liable or responsible for any shares that are found to be forged. However, Meghna Bank Securities Ltd. will make every attempt to replace the forged shares from the seller. Law: The terms and conditions contained herein shall be governed by and be construed in accordance with the laws of Bangladesh. Notices: (a) All notices, instructions or other communications shall be given English and in writing (facsimile, telex, telegram, cable or letter) or orally and shall be sent to Meghna Bank Securities Ltd. and the account holder at the address, fax and/or telex number shown herein or at such other address as may be communicated by the parties hereto in writing. (b) Proof of delivery or dispatch shall be : (i) in the case of a letter : dispatch of the letter duly stamped and addressed. (ii) in the case of facsimile, telex, telegram or cable on the day of dispatch with mechanical confirmation. (c) All oral notices, instructions or other communications should be confirmed in writing within 24 hours. Definitions: Words defined herein, save where a contrary meaning appears or such meaning is inconsistent with the context, shall have this same defined meaning wherever used. Sums due: For all purposes, including any legal proceedings, a certificate by any of Meghna Bank Securities Ltd. officers confirming the monies and/or liabilities for the time being due and/or incurred to by the account holder shall be conclusive evidence thereof against him/her. I/we have read the terms and conditions contained herein above, and having agreed with such terms and conditions. Signature of Joint Account Holder Signature of the Account Holder FOR OFFICE USE ONLY Name: Name:



CBDL By Laws Form 02

| | A CONTRACTOR | | | n [By Law 7.3.3 (b)] | | |
|--|------------------------|--|--|------------------------|--------------------------|---|
| Please complete all details Holder's correspondence a | | ers. Please till all n | ames correctly. A | All communication s | hall be sent only to the | First Named Account |
| Application No. | | | | | Date: | |
| Please Tick whichever is applic | | | | 20 T 1-10 I | | Injet Holdor∏ |
| BO Category: Regular □ | Omnibus 🗌 | Clearing | | BO Type: Indivi | fual ☐ Company ☐ |] Joint Holder□ |
| Name of CDBL Paritcipant (U | | and the second s | The second secon | | Date: | |
| CBDL Participant ID 2 2 | | landar land | 2 2 2 0 0 | esta casanco | Date. | |
| /we request you to open a | Depository Acco | unt in my/our name | as per the followi | ng details. | | |
| FIRST APPLICANT | | | | | | |
| Name in Full of Account Ho Short Name of Account Hol | lder (Up to 99 Ch | aracters) me starting with Title | i a Mr/Mrs/Ms/ | Or abbreviate only it | f over 30 characters) | Title i.e. Mr./Mrs./Ms./D |
| Short Name of Account Hol | uei (iliseit iuli ilai | me statuting with the | 2 1.G. MILTWISTINIST | Dr. abbreviate diliy i | 070, 00 0110100107 | |
| | (01-1-1 Dod.) | Name of Control D | | | | |
| (In case of a Company/Firm | 2000000000 | | | | | |
| In Case of Individual | Male□ | Female _ | - 0 1 | 1 | | |
| Father's/Husband's Name: | | | | | | |
| Mothers Name: | | | | | | |
| CONTACT DETAILS | | | | | | |
| Address: | | | | | | |
| City: I | | | | | | |
| Mobile Phone: | | | | Email: | | *************************************** |
| PASSPORT DETAILS | | VALVO OF BANK (STATE) | ** | | Foods Bak | |
| Passport No.: | , | Issue Place: | IS | sue Date: | Expiry Date | J |
| BANK DETAILS | | | | | | |
| Routing Number: | | | | | | |
| Bank Name: | | | | | | |
| Bank Identifier Code (BIC) | | | | | | |
| Electronic Dividend Credit | Yes □ N | lo□ Tax E | xemption (if any): | Yes □ No □ | TIN/Tax ID : | |
| OTHERS INFORMATION | | | | | 1 | |
| Residency: Resident | Non Resident | | | | Date of Birth | |
| Statement Cycle Code D | | | | | ecify) | |
| Internal Ref. No. (To be fille | ed in by CDBL Pa | rticipant) | *************************************** | | | |
| In Case of Company: | | | | Data | of Pogistration | |
| | | | | Date i | n Registration | |
| Registration No.: | ., | | | | | |
| | | | | | | |

| | LINK REQUEST | | 577 (1986 - 1980 (1984) | /p/mm-22 | | |
|--|--|--|--|---------------|------------------------------------|--|
| | | your existing Depository Acco | | No 🗌 | T. | |
| If yes, then | please provide the, De | epository B0 Account Code (8 | Digits): | | | |
| NOMINEES | /HEIRS | | | | | |
| sole Accou Nominees | nt Holder/all the Join giving names of nomi | it Account Holders, a separat | e nomination Form-2 ccount holder, percen | 3 must be fil | led up and sig | ount in the event of the death of the ned by all Account Holders and the ct details. If any nominee is a minor |
| POWER OF | ATTORNEY (POA) | | | | - | |
| | | a Power of Attorney (POA) to me, contact details etc. of the | | | | m-20 must be filled up and signed by e form. |
| TO BE FILL | ED IN BY THE STOCK | BROKER/STOCK EXCHANGE | IN CASE THE APPLIC | ATION IS FO | R OPENING A | CLEARING ACCOUNT |
| Exchange N | lame: DSE□ | Trading ID | | CSE□ | Trading ID | |
| PHOTOGR/ | | | | | | |
| STANDING I/we author DECLARAT The rules a have unde that the particular in the pa | and regulations of the rstood the same and li | csimile (fax) transfer instruction Depository and CDBL Particip We agree to abide by and to be Jus are true to the best of my | pant pertaining to an a bound by the rules as four knowledge as on | s No | from time to tim naking such ap | Please paste recent passport size Photograph Authorized Signatory in case of Limited co. Authorized Signatory in case of Limited Co. Authorized Signatory in case of Limited Co. |
| | Applicants | Name of Applicants/ | Authorzed Signator | ries in case | of Ltd Co. | Signature with date |
| First App | olicant | | | | | |
| Second | Applicant | | | | | |
| 3rd Sign | atory (Ltd. Co. only) | | | | | |
| SPECIAL IN | ISTRUCTIONS ON OP | ERATION OF JOINT ACCOUNT | | | | |
| | | | Any two will operate jo | 2000,000 | | , |
| ☐ Accou | nt will be operated by | f | | | | with any one of the others |
| INTRODUC | | | | | | |
| | | ount Holder of | | | Partition of a se | Highway and Anna Co. |
| I confirm t | he identity, occupatio | n and address of the applicar | | | | |
| | 51 | gristory of Interducer | | Bo ID 1 2 | 0 2 2 2 | 0 0 |
| | | | | | | |

Authorized Signatrory Accepting the Account



Central Depository Bangladesh Limited (CDBL)
Depository Account (BO Account) opened with CDBL Participant

TERMS AND CONDITIONS [By Law 7.3.3 (c)]

Meghna Bank Securities Ltd.

Depository Participant No.

Dear Sir(s)

Please open a Depository account (BO Account) in my/our names(s) on the terms and conditions set out bellow. In consideration of Meghna Bank Securities Ltd. (the "CDBL Participant") opening the account providing depository account facilities to me/us, I/we have signed the B0 Account Opening Form as a token of acceptance of the terms and conditions set out below.

- I/we agree to be bound by The Depositories Act, 1999. Depositories Regulations, 2000, The Depository (User) Regulations 2003, and abide by the Bye Laws and Operating instructions issued from time to time by CDBL.
- CDBL shall allocate a unique identification number to me/us (Account Holder BO ID) for the CDBL Participant to maintain a separate Account for me/us, unless
 the I/we instructs the CDBL Participant to keep the securities in an Omnibus Account of the CDBL Participant. The CDBL Participant shall however ensure that
 my/our securities shall not be mixed with the CDBL Participant's own securities.
- I/we agree to pay such fees, charges and deposits to the CDBL Participant, as may be mutually agreed upon, for the purpose of opening and maintaining
 my/our account, for carrying out the instructions and for rendering such other services as are incidental or consequential to my/our holding securities in and
 transacting through the said depository account with the CDBL Participant.
- 4. I/we shall be responsible for: A
 - (a) The veracity of all statements and particulars set out in the account opening form, supporting or accompanying documents.
 - (b) The authenticity and genuineness of all certificates and/or documents submitted to the CDBL Participant along with or in support of the account opening form or subsequently for dematerialization.
 - (c) Title to the securities submitted to the CDBL Participant from time to time for dematerialization.
 - (d) Ensuring at all times that the securities to the credit of my/our account are sufficient to meet the instructions issued to the CDBL Participant for affecting any transaction/transfer.
 - (e) Informing the CDBL Participant at the earliest of any changes in my/our account particulars such as address, bank details, status, authorizations, mandates, nomination, signature, etc.
 - (t) Furnishing accurate identification details whilst subscribing to any issue of securities.
- 5. I/we shall notify the CDBL Participant of any change in the particulars set out in the application form submitted to the CDBL Participant at the time of opening the account or furnished to the CDBL Participant from time to time at the earliest. The CDBL Participant shall not be liable or responsible for any loss that may be caused to me/us by reason of my/our failure to intimate such change to the CDBL Participant at the earliest.
- 6. Where I/we have executed a B0 Account Nomination Form:
 - a) In the event of my/our death, the nominee shall receive/draw the securities held in my/our account.
 - b) In the event, the nominee so authorized remains a minor at the time of my/our death, the legal guardian is authorized to receive/draw the securities held in my/our account.
 - c) The nominee so authorized, shall be entitled to all my/our account to the exclusion of all other persons i.e., my/our heirs, executors and administrators and all other persons claiming through or under me/us and delivery of securities to the nominee in pursuance of this authority shall be binding on all other persons.
- 7. I/we may at any time call upon the CDBL Participant to close my/our account with the CDBL Participant provided no instructions remain pending or unexecuted and no fees or charges remain payable by me/us to the CDBL Participant. In such event I/we may close my/our account by executing the Account Closing Form if no balances are standing to my/our credit in the account. In case any balances of securities exist in the account the account may be closed by me/us in one of the following ways:
 - (a) By dematerialization of all existing balances in my/our account.
 - (b) By transfer of all existing balances in my/our account to one or more of my/our other account(s) held with any other CDBL Participant(s).
 - (c) By dematerialization of a part of the existing balances in my/our account and by transferring the rest to one or more of my/our other account(s) with any other CDBL Participant(s).

- 8. CDBL Participant covenants that it shall,
 - a) Act only on the instructions or mandate of the Account Holder or that of such person(s) as may have been duly authorized by the Account Holder in that behalf.
 - b) Not affect any debit or credit to and from the account of the Account Holder without appropriate instructions from the Account Holder.
 - c) Maintain adequate audit trail of the execution of the instructions of the Account Holder.
 - d) Not honour or act upon any instructions for effecting any debit to the account of the Account Holder in respect of any securities unless:
 - (i) Such instructions are issued by the Account Holder under his signature or that of his/its constituted attorney duly authorized in that behalf;
 - (ii) The CDBL Participant is satisfied that the signature of the Account Holder under which instructions are issued matches with the specimen of the Account Holder or his/its constituted attorney available on the records of the CDBL Participant;
 - (iii) The balance of clear securities available in the Account Holder's account are sufficient to honour the Account Holder's instructions.
 - e) Furnish to the Account Holder a statement of account at the end of every month if there has been even a single entry or transaction during that month, and in any event once at the end of each financial year. The CDBL Participant shall furnish such statements at such shorter periods as may be required by the Account Holder on payment of such charges by the Account Holder as may be specified by the CDBL Participant. The Account Holder shall scrutinize every statement of account received from the CDBL Participant for the accuracy and veracity thereof and shall promptly bring to the notice of the CDBL Participant any mistakes, inaccuracies or discrepancies in such statements.
 - f) Promptly attend to all grievances/complaints of the Account Holder and shall resolve all such grievances/complaints as it relate to matters exclusively within the domain of the CDBL Participant within one month of the same being brought to the notice of the CDBL Participant and shall forthwith forward to and follow up with CDBL all other grievances/complaints of the Account Holder on the same being brought to the notice of the CDBL Participant and shall endeavour to resolve the same at the earliest.
- 9. The CDBL Participant shall be entitled to terminate the account relationship in the event of the Account Holder.
 - (a) Failing to pay the fees or charges as may be mutually agreed upon within a period of one month from the date of demand made in that behalf;
 - (b) Submitting for dematerialization any certificates or other documents of title which are forged, fabricated, counterfeit or stolen or have been obtained by forgery or the transfer whereof is restrained or prohibited by any direction, order or decree of any court or the Securities and Exchange Commission;
 - (c) Commits or participates in any fraud or other act of moral turpitude in his/its dealings with the CDBL Participant;
 - (d) Otherwise misconducts himself in any manner.
- 10. Declaration and Signature

I/we hereby acknowledge that I/we have read and understood the aforesaid terms and conditions for operating Depository Account (BO Account) with CDBL Participant and agree to comply with them.

| Applicants | Name of Applicants/Authorzed Signatories in case of Ltd Co. | Signature with date |
|-------------------------------|---|---------------------|
| First Applicant | | |
| Second Applicant | | |
| 3rd Signatory (Ltd. Co. only) | | |

STATE OF THE PARTY.

CBDL By Laws Form 23

BO Account Nomination Form

| Please complete all details in CAPITAL lette only the First Named Account Holder as spe | | | sent to the correspondence address of |
|--|-----------------------------------|------------------------------------|---|
| Application No. | | | Date: |
| Name of CDBL Participant (Up to 99 Characters) | Meghna Bank Securities Limited | | |
| CBDL Participant ID 2 2 2 0 0 | BO ID 1 2 0 2 2 2 0 | 0 | Date: |
| Name of Account Holder (Insert full name solution) I/we nominate the following person(s) who is holder/all the joint holders. | | | |
| NOMINEE/HEIRS DETAILS (Nominee 1) | | | |
| Name in Full | | | |
| Short Name of Nominee (Insert full name sta | rting with Title i.e. Mr/Mrs./Ms | s./Dr. abbreviate only if over 3 | 0 characters) Title i.e. Mr./Mrs./Ms./Dr. |
| | | | |
| Relationship with A/C Holder: | | Percentage | (%) |
| Address: | | | |
| City: Post Code: | State/Division: | Country: | Tel: |
| Mobile Phone: | Fax: | Email: | |
| Passport No.: | Issue Place: | Issue Date: | Expiry Date: |
| Residency: Resident ☐ Non Resident ☐ | | | |
| Guardian's Details (if Nominee is a Min | .77 | | |
| Short Name of Nominee (Insert full name start | ing with Title i.e. Mr/Mrs./Ms./D | r. abbreviate only if over 30 char | racters) Title i.e. Mr./Mrs./Ms./Dr. |
| | | | |
| Relationship with Nominee: | | Maturity Da | |
| Address: | | | |
| City: Post Code: | | | |
| Mobile Phone: | | | |
| Passport No.: | ssue Place: | Issue Date: | Expiry Date: |
| Residency: Resident Non Resident | Nationality: | Date of | f Birth |

| ame in Full | | | |
|--|--|--|--|
| ort Name of Nominee (Insert full n | name starting with Title i.e. Mr./Mrs./Ms. | /Dr. abbreviate only if over 30 Characte | rs) Title i.e.Mr./Mrs.Ms./I |
| | | | |
| elationship with A/C Holder: | | Percentage (%) | |
| ldress: | | | |
| ty: Post Code | e: State/Division: | Country: | Tel: |
| obile Phone: | Fax: | Email: | |
| assport No.: | Issue Place: | Issue Date: | Expairy Date: |
| esidency: Resident Non Re | esident Nationality: | Date of Birt | h |
| uardian's Details (if Nominee | is a Minor) | | |
| | | | |
| nort Name of Nominee (Insert full n | name starting with Title i.e. Mr./Mrs./Ms. | /Dr. abbreviate only if over 30 Characte | rs) Title i.e.Mr,/Mrs,Ms./ |
| | | | |
| elationship with Nominee; | Date of Birth of Minor | Maturity Date of | Minor |
| Idress: | | | |
| he Bost Code | e: State/Division: | Country: | Tol |
| | | Email; | |
| issport No.: | Issue Place: | Issue Date: | Expairy Date: |
| esidency: Resident 🗌 Non Re | | | |
| | esident Nationality: | Date of Birt | th U H H H |
| | • | Date of Bin | th U L C |
| HOTOGRAPH OF NOMINEES/HE | • | Date of Bin | h i i i i i i i i i i i i i i i i i i i |
| | • | Date of Bin | h la |
| | • | Date of Bin | h la |
| HOTOGRAPH OF NOMINEES/HEI | Please paste recent | Please paste recent | Please paste recent |
| HOTOGRAPH OF NOMINEES/HE | IRS | | |
| Please paste recent passport size | Please paste recent passport size | Please paste recent passport size | Please paste recent passport size |
| Please paste recent passport size | Please paste recent passport size | Please paste recent passport size | Please paste recent passport size |
| Please paste recent passport size | Please paste recent passport size | Please paste recent passport size | Please paste recent passport size |
| Please paste recent passport size Photograph | Please paste recent passport size Photograph | Please paste recent passport size Photograph Guardian 1 | Please paste recent passport size Photograph |
| Please paste recent passport size Photograph | Please paste recent passport size Photograph Nominee/Heir 2 | Please paste recent passport size Photograph Guardian 1 | Please paste recent passport size Photograph Guardian 2 |
| Please paste recent passport size Photograph Nominee/Heir 1 Applicants | Please paste recent passport size Photograph Nominee/Heir 2 | Please paste recent passport size Photograph Guardian 1 | Please paste recent passport size Photograph Guardian 2 |
| Please paste recent passport size Photograph Nominee/Heir 1 Applicants Nominee/Heir 1 | Please paste recent passport size Photograph Nominee/Heir 2 | Please paste recent passport size Photograph Guardian 1 | Please paste recent passport size Photograph Guardian 2 |
| Please paste recent passport size Photograph Nominee/Heir 1 Applicants Nominee/Heir 1 Guardian 1 | Please paste recent passport size Photograph Nominee/Heir 2 | Please paste recent passport size Photograph Guardian 1 | Please paste recent passport size Photograph Guardian 2 |
| Please paste recent passport size Photograph Nominee/Heir 1 Applicants Nominee/Heir 1 Guardian 1 Nominee/Heir 2 | Please paste recent passport size Photograph Nominee/Heir 2 | Please paste recent passport size Photograph Guardian 1 | Please paste recent passport size Photograph Guardian 2 |



CBDL By Laws Form 20

| Power | of Attorney (P | OA) From | 100 800 | | | |
|--|--------------------------------------|-------------------|-------------------|---|-------------|-----------------|
| Please complete all details in CAPITAL letters. Please fill all only the First Named Account Holder as specified in BO Account | | | shall be sent to | the corresp | ondence | address of |
| Application No. | | | Date: | | | |
| Name of CDBL Participant (Up to 99 Characters) : Meghna Ba | ank Securities Limite | d | | | | |
| CBDL Participant ID 2 2 2 0 0 BO ID 1 2 | 0 2 2 2 0 0 | | Date : | 9 | | |
| Name of Account Holder (Insert full name starting with Ti | tie .e. Mr./Mrs./Ms./C | r. abbreviate | only if over 30 | Characters | s) | |
| | | | | | | |
| POWER OF ATTORNEY HOLDER'S DETAILS | | | | | | |
| AND | | | | | | |
| Name in Full | | s /Dr. ahhreviate | only if over 30 C | haracters) | Title i.e.f | Mr./Mrs.Ms./Dr. |
| Short Name of Power of Attorney Holder (Insert full halfe starting | With Tibe i.e. Wil./Wis://w | S./Dr. abbreviate | Only II Over oo o | naractoro ₁ | 1100101 | |
| | | | | | | |
| POWER OF ATTORNEY HOLDER'S CONTACT DETAILS | | | | | | |
| Address: | | | | ************* | | *************** |
| City: | ision: | Coun | try: | | . Tel: | |
| Mobile Phone: | | Email: | | | | |
| POWER OF ATTORNEY HOLDER'S PASSPORT DETAILS | | | | | | |
| Passport No.: | Issu | ue Date: | E | xpairy Date | I | |
| OTHERS INFORMATION OF POWER OF ATTORNEY HOLDER | | | | | | |
| | | | Date of Birth | | | |
| | | | X NESSAN BOOKS | | | |
| Power of Attorney Effective From | То | | | | | |
| Remarks (insert reference to POA document i.e. Specific POA | or General POA etc.): | | | | | |
| | | | | *************************************** | | |
| PHOTOGRAPH OF POWER OF ATTORNEY HOLDER | | | | | | |
| | | | | | | |
| | Please paste recent passport size | | | | | |
| | Photograph | | | | | |
| - 3 | of POA Holder | | | | | |
| | | | | | | |
| | | | | | | |

DECLARATION

The rules and regulations of the Depository and Participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and i/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/we also declare that the particulars given by me/us are true to the best of my/our knowledge as on the date of making such application. I/we further agree that any false/misleading information given by me/us or suppression of any material fact will render my/our account liable for termination and further action.

| Applicants | Name of Applicants/Authorized Signatories in case of Ltd Co. | Signature with date |
|-------------------------------|--|---------------------|
| POA Holder | | |
| First Applicant | | |
| Second Applicant | | |
| 3rd Singatory (Ltd. Co. Only) | | |



LETTER OF AUTHORIZATION

| I/We do hereby authorize transfer from my Beneficia | MEGHNA BANK SECURITIES LIMITED to theat my exercise of the securities of the securit | ecuted sale order of securtites as pay in S LIMITED clearing Account. | instruction i.e |
|---|--|--|---|
| I/We do further authorize | MEGHNA BANK SECURITIES LIMITED to debit all CDE | L related fees & charges from my Secu | rities Account. |
| | | , | |
| | | | |
| 19 | | | |
| Name of Account Holder (| s):1 | | *************************************** |
| | | | |
| | : 2 | | |
| Customer Account No. | | | |
| Customer Account No. | | | |
| BO Account No. | 1 2 0 2 2 2 0 0 | | |
| | 3 (8) | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Date & Signatu | re of Account Holder - | Date & Signature of Joint Account Hold | ior |
| | | Late or September of South Probability (1900) | |
| | | | |



Photograph of 1st Account Holder Photograph of Joint Account Holder

KYC PROFILE

| lient Code : | | | Accoun | t Type ; | Margir | 1 | Non-Mar | gin |
|---|--------------------------|---|---|--|--------------------------|----------------|---|-----|
| ame of Account Ho | lder | | | | | | | |
| ame of Joint Accou | nt Holder | | | | | | | |
| O ID No. | 1.2 | 2 0 2 2 2 0 0 | | | | | | |
| Source of Income | 1: | | | | | | | |
| Service: | Governme | nt Private | | | | | | |
| | (i) Name of th | e Organization | | | | | | |
| | (ii) Designatio | on | | | | | | |
| | (iii) Monthly Ir | | 2 22 22 | a version de la companya de la comp | 11110 | T (| STORES IN | |
| | (Proof of serv | ice i.e. (Salary/Employment | Certificate) from | the emplo | yer MUS | i be pr | ovided) | |
| Business: | Public | Private | | | | | | |
| | (i) Name of th | ne Organization | | | | | | |
| | | | | | | | | |
| | (ii) Details of | | | 20010 | chii | | | |
| | total and the second | the Business iness i.e. TIN number/Trade | License MUST I | oe provided | d) | | | |
| Others: (Please s | (Proof of busi | | | | | | | |
| Others: (Please s | (Proof of busi | iness i.e. TIN number/Trade | | | | | | |
| , | (Proof of busi | iness i.e. TIN number/Trade | | | | No | (if applicable) | |
| assport No. | (Proof of busi | iness i.e. TIN number/Trade | | Obtained | | Promo | (if applicable) | |
| assport No. oter ID Card No. | (Proof of busi | iness i.e. TIN number/Trade | Photocopy | Obtained Obtained | Yes | No | Workston and American | |
| assport No. oter ID Card No. ational ID No. | (Proof of busi | iness i.e. TIN number/Trade | Photocopy Photocopy | Obtained Obtained Obtained | Yes Yes | No No | (if applicable) | |
| assport No. oter ID Card No. ational ID No. IN No. | (Proof of busi | iness i.e. TIN number/Trade | Photocopy Photocopy Photocopy | Obtained Obtained Obtained Obtained | Yes Yes Yes | No No | (if applicable) | |
| assport No. oter ID Card No. lational ID No. IN No. 'AT Reg. No. | (Proof of busi | iness i.e. TIN number/Trade | Photocopy Photocopy Photocopy Photocopy | Obtained Obtained Obtained Obtained Obtained | Yes Yes Yes | No No No | (if applicable) (if applicable) (if applicable) | |
| Others: (Please states of the Please states of the | (Proof of businessecify) | iness i.e. TIN number/Trade | Photocopy Photocopy Photocopy Photocopy Photocopy | Obtained Obtained Obtained Obtained Obtained | Yes Yes Yes Yes | No No No | (if applicable) (if applicable) (if applicable) (if applicable) | |



| | | | | | T | RA | NS | A(| H | 0 | N F | R | OF | ILE | | | | | | | | Š | | | | 1 | | |
|---------------------------|--|-----------------------------|-------------|------------|---------|--------|-------|-------|-------|-------|--------|------|---|-------|--------|------|--------------|------------------------|------|------|--------|------|------------------|--------|-------|-------|--------|--------|
| A 0.0 | ount Number | | | | | | | | | | Ī | | - | | | | | - | | f. | | | | | | | | |
| | | | L | | | H | ÷ | | | | H | Ļ | Ł | 1 | | | | L |)ate | | | | | | 1 | | | |
| Title | of Account (Firs | t Applicant) | Ш | | | | | | | | Ц | 1 | | | Ш | | Ш | | | | | | L | L | | | | |
| | (Second | d Applicant) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Тур | e of Account | | | JOIN' | | | | UN | T | | | | | Ξ. | MAR(| | | IN | | | | | | | | | N | NRB |
| во | D No. | | 1 | 2 | 0 | 2 | 2 | 2 | 2 | 0 | 0 | | | | | | | | | | | | | | | | | |
| | Par | ticulars | | | N | lo. of | Trans | sact | ions | (Mo | nthly |) | M | laxin | num ' | Tran | nsac ansa | tior | n am | loui | ıt. | Ĭ | Tot | al a | imo | unt (| (Mai | nthly) |
| osit | Cash Deposit (inclu | sive of Online | Transa | ctions) | | | | | | | | | | | | | | | | | | t | | | | | | |
| Deposit | Transfer/Deposit by | Instruments | | | | | | | | | | Ť | | | | | | | | | | t | | | | | | |
| | Others (specify) | | ,,,, | | | | | | | | | | | | | | | | | | | t | | | | | | |
| | | | | | | | | | | | | | | | Tota | ıl D | еро | sit | (ap | pro | x.) | | | | | | | |
| al | Particulars | | Particulars | | | | Trans | acti | ons | (Mai | nthly) | | Maximum Transaction amount (each Transaction) | | | | ıt | Total amount (Monthly) | | | nthly) | | | | | | | |
| Withdrawal | Transfer/payment b | y Instruments | | | | | | | | | | Ī | | | | | | | | | | Ī | | | | | | |
| With | Others (specify), | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | То | tal V | Vith | dra | wa | (ap | pr | ox.) | | | | | | | |
| - | Particulars | No. of Tra | eccetie | (1.6 | ecor | | | | V | olum | no of | Tro | 2000 | Tana | /D=1 | CSV: | | | | 17-1 | 2020 | | o magazina di sa | | | | 0000 | ac e c |
| rities | Buy | IVU, UI III | (IDGUUL) | a faintiff | any) | | + | | V | Jiui | ne of | ııdl | iodul | JUIS | (Dal | y) | | | | vol | ume | 1 01 | ırar | isa(| ullof | 15 (1 | non | thly) |
| Securities Transaction | Sell | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1888 | | | | | | | | | | | | | | | | | | | | | | | | | | | | Ť. |
| Sour | ces of Fund | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| We the | undersigned hereby a update the transaction | cknowledge that profile. | it the tr | ansactio | ons lir | nit is | my/ou | ir or | ganiz | zatio | n's us | sual | trans | actio | ns, I/ | We | do h | ere | by a | ckn | owle | edge | e tha | t if r | nece | ssa | ry, 1/ | We wi |
| igna | ature | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Vame | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| SI No. | Business Nature | Risk Level | Score |
|--------|--|------------|-------|
| 1. | Jewellery/Gold related Business | High | 5 |
| 2 | Money Changer/Courier Service Agent | High | . 5 |
| 3 | Real Estale Agent | High | 5 |
| 4 | Construction Project Promoter | High | 5 |
| 5 | Offshore Corporation | High | 5 |
| 6 | Art/Antique Dealer | High | 5 |
| 7 | Restaurant/Bar/Night Club/Residential Hotel Owner | High | 5 |
| 8 | Import/Export Agent | High | 5 |
| 9 | Cash intensive business (Taka 25 Lacs per month) | High | 5 |
| 10 | Share/Stock Dealer | High | 5 |
| 11 | Manpower Export Business | High | 5 |
| 12 | Operating from multiple locations | High | 5 |
| 13 | Film Production/Distribution Business | High | 5 |
| 14 | Arms Business | High | - 5 |
| 15 | Mobile Phone Operator | High | 5 |
| 16 | Traders with turnover of more than 1 crore per asnum | High | 4 |
| 17 | Travel Agent | High | 4 |
| 18 | Transport Operator | Medium | 3 |
| 19 | Auto Dealer (Recondition vehicles) | Medium | 3 |
| 20 | Leasing/Financing Company | Medium | 3 |
| 21 | Freight/Shipping/ Cargo Agent | Medium | 3 |

| Si No. | Business Nature | Risk Level | Score |
|--------|---|------------|-------|
| 22 | Insurance/Brokerage Agency | Medium | 3 |
| 23 | Religious Organization | Medium | 3 |
| 24 | Recreational Eirm/Park | Medium | 3 |
| 25 | Motor Parts Business | Medium | 3 |
| 26 | Tobacco/Cigarette Business | Medium | 3 |
| 27 | Auto Primary (New Vehicle) | Low | 2 |
| 28 | Retail Shop Owner | Low | 2 |
| 29 | Business Agent | Low | 2 |
| 30 | Small Business (Turnover below Tk. 50 Lacs perAnnum) | Low | 2 |
| 31 | Self Employed | Low | 2 |
| 32 | Corporate Customer | Low | 2 |
| 33 | Building Mateital Business | Low | 2 |
| 34 | Computer/Mobile Phone Dealer | Low | 2 |
| 35 | Software Business | Low | |
| 36 | Manufacturer (Excluding Weapons) | Low | 1 |
| 37 | Retired from job | Low | 1 |
| 38 | Seniice | Low | 0 |
| 39 | Student | Low | 0 |
| 40 | Housewife | Low | 0 |
| 41 | Farmer | Low | 0 |
| 42 | Others Brockerage House to assign Risk Score based on nature and type | High | 5 |

(For the tables below; the highest amount in the range should be considered. For Example: Tk. 50 Lacs should be considered in the 0-50 range)

Net Worth of Customer:

| Amount in Taka | Risk Level | Risk Rating | | |
|-------------------|------------|-------------|--|--|
| 1-50 Lacs | Low | 0 | | |
| 50 Lacs - 2 Crore | Medium | 1 | | |
| Above 2 Crore | High | 3 | | |

How was Account opened?

| How | Risk Level | Risk Rating |
|---|------------|-------------|
| By Relationship Manager/Branch | Low | 0 |
| Through Direct Sales Agent of Merchant Bank | Medium | 1 |
| Through Internet | High | 3 |
| Unsolicited/Walk-in | High | 3 |

Expected value of Monthly Transactions as per Customer:

| Value of Transactions (Taka in Lacs) | Risk Level | Risk Rating |
|--------------------------------------|------------|-------------|
| 1-10 | Low | 0 |
| 10 - 50 | Medium | 1 |
| Above 50 | High | 3 |

Expected Number of Monthly Transactions as per Customer:

| Number of Transactions | Risk Level | Risk Rating |
|------------------------|------------|-------------|
| 1-100 | Low | 0 |
| 101 - 250 | Medium | 1 |
| Above 250 | High | 3 |

Expected value of Monthly Cash/ Securities Transactions as per Customer:

| Number of Transactions (Taka in Lacs) | Risk Level | Risk Rating |
|---------------------------------------|------------|-------------|
| 1-10 | Low | 0 |
| 10 - 25 | Medium | - 1 |
| Above 25 | High | 3 |

Expected No. of Monthly Cash/ Securities Transactions as per Customer;

| Number of Transactions | Risk Level | Risk Rating |
|------------------------|------------|-------------|
| 0-15 | Low | 0 |
| 15 - 30 | Medium | 11 |
| Above 30 | High | 3 |

Overall Risk Assessment is as follows:

| Risk Level | Risk Rating | Due Diligence | | |
|------------|-------------|-----------------------------------|--|--|
| Low | Below 14 | Selective Papers need to verified | | |
| Medium | 14 or Above | All Papers need to verified | | |

Comments:

^{(*} Customer may be classified as of High Risk after subjective consideration, even if the overall rating is below 14)

| e Customer's Addresses been verified? | Yes No No |
|---|-----------------------------------|
| es, how was address verified? | |
| | |
| | - |
| ically Exposed Persons (PEPs): (as per AML Circular no. 14) | |
| a) Has approval been obtained from Senior Management? | Yes No |
| b) Source of Wealth: | |
| c) Was any face to face interview held with customer? | Yes No No |
| Preparer: Account Opening | Reviewer: |
| Officer/Relationship Account Opening Officer | Branch Manager/Head of Operations |
| /Relationship Manager | |
| Seal & Signature: | Seal & Signature: |
| Name: | Name: |
| Date: | Date: |
| | |
| .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| d) When was the information related to the Account last revie | ewed and updated? |
| | |
| | |
| | |
| Name of Officer performing review and update: | |
| | |
| Signature | |
| Date: | |



Account information regarding FATCA

(This Supplimem must be Completed by any individual who is operating/wishes to open a B0 account)

| | BO ACCOUN | T OPENING FORM SUP | PLEMENT (This Supp | plement consists of one page) |
|--|-----------|--------------------|--------------------|-------------------------------|
|--|-----------|--------------------|--------------------|-------------------------------|

| | | | | | | • | |
|--|--|--|---------------------|----------------------|--------------------|---|-------|
| Cos | stomer ID | | BO ID No. | 1 2 0 2 | 2 2 0 0 | | |
| Ple | ase complete in BLOCK LETTERS | | | | | | |
| 1. | Name of the applicant: | | | | | | |
| 2. | Country of Residence: | | ****************** | | | *************************************** | |
| 3. | Country of Birth: | | | | | | |
| | Please Tick "√" Yes or No for each of the f | | | | | | |
| | i. Are you a US Resident? | | Yes 🗀 | No 🗌 | | | |
| | iii. Are you a US Citizen? | | Yes 🖂 | No 🗍 | | | |
| | iii. Do you hold a US Permanent Resident | Card (Green Card)? | Yes | No 🗌 | | | |
| 5. | If your answer is "Yes" to any of the ab | ove questions, please prov | ide additional is | nformation as red | quested below: | | |
| | i. Residency Number/Passport Number/0 | | | | | | |
| | ii. Address of the Account Holder in: | | | | | | |
| | USA: | | | | | | 2000 |
| | | | | | | | |
| | Bangladesh: | *************************************** | | | | ********** | ***** |
| | | | | | | | iner. |
| | iii. A US "in care of" or "hold mail" or P.O. | BOx address: | | | | | |
| | iv. E-mail ID: | | ****************** | ********** | ************** | *************************************** | |
| | v. Telephone Number: In USA: | | | | | | |
| vi. If applicable, please mention the name of the person in the US with address to whom Power of Attorney is granted a | | | | | | anted for operating Ban | k |
| | | | | | | | |
| | vii. Is there any Standing Instruction to | | | | | | |
| | | | | | | | **** |
| viii. Do you submit Form 8938 with your federal income tax return to IRS'? If yes, please provide your income tax file number: | | | | | | | |
| | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | |
| | ix. E-TIN (Electronic Tax Identilication Nu | mber) in Bangladesh, if any: | | | | | |
| | W 250 00 00 0 00 00 00 | 22.00 | 2.00 | | | | |
| | ereby confirm the information provided above eject to applicable local laws, I hereby conse | | | of its afoliates /in | cluding branche | a) (collectively "MGBSL") | |
| | hare the above information with domestic o | 하는데 하는데 하는 것이 같아. 얼마나 되었다면 하는데 살아 없었다. 것 | | | | | |
| juris | sdiction. | a i company a governo y special si si spe niere a decensor de la disease que a conservo e | | | | | |
| | ere required by domestic or overseas regi ounts as may be required according to ap | | | gree that *MGBS | L" may withholo | from my Account(s) su | ch |
| Lun | dertake to notify "MGBSL" within 30 caler | ndar days if there is a chang | ge in my inforn | nation which I ha | ave provided to | MGBSL*. | |
| | | and the second s | | | | | |
| | | | | | | | |
| Dat | e: | | | | | | |
| | | Signature of the Accou | nt holder with date | 9 | Signature of the 2 | oint Account holder with date | |



Account information regarding FATCA

(This supplement must be completed by the authorized signatory (ies) of the Entity operating in Bangladesh)

| | BO ACCOUNT OPENING FORM SUPPLEMENT (This Supplement consists of one page) | | | | | | |
|---|---|--|--|--|--|--|--|
| Cu | BO ID No. 1 2 0 2 2 2 0 0 | | | | | | |
| Die | | | | | | | |
| Please Complete in BLOCK LETTERS | | | | | | | |
| - 12 | Please mention whether the Entity is incorporated/registered in the US or Bangladesh: | | | | | | |
| 2. | If the Entity is incorporated/registered in the US, please provide its incorporation/registration number in the US: | | | | | | |
| 3. Please provide the following information for the Entity registered! incorporated/operating in Bangladesh having any US | | | | | | | |
| | shareholder(s) of the Entity (Detailed shareholding position must be enclosed) | | | | | | |
| | i. Name of the Entity: | | | | | | |
| | ii. Date of Incorporation/Registration: | | | | | | |
| | iii. Address of the Entity 3 | | | | | | |
| | iv. Contact Telephone Number of the Entity: | | | | | | |
| v. E-TIN (Electronic Tax identification Number) of the Entity in Bangladesh: | | | | | | | |
| 4. | Does the Entity have any US Person(s) as Shareholder(s) holding 10% or more ownership in the Entity? Yes III No III | | | | | | |
| If yes, please provide following information | | | | | | | |
| | (Please add extra pages if there is insufficient space in the form) | | | | | | |
| | i. Name of the US Person(s): | | | | | | |
| | ii. Residency Number/Passport Number/Green Card Number: | | | | | | |
| | III. Address in: | | | | | | |
| | USA: | | | | | | |
| | | | | | | | |
| | Bangladesh: | | | | | | |
| | LATIO 20 AND | | | | | | |
| | iv. A US "in care of" or "hold mail" or PO. Box address, If any: | | | | | | |
| | v. E-mail ID: | | | | | | |
| | III Darigiauesti, +000- | | | | | | |
| Subje | pehalf of the Entity, hereby confirms the information provided above is true, accurate and complete. act to applicable local laws, I hereby consent for Meghna Bank Securities Ltd. or any of its affiliates (including branches) (collectively "MGBSL") | | | | | | |
| to sna | are the above information with domestic or overseas regulators or tax authorities where necessary to establish tax liability of the Entity in any | | | | | | |
| Juliau | iction. e required by domestic or overseas regulators or tax authorities, I consent and agree that "MGBSL" may withhold from the Entity Account(s) | | | | | | |
| such | amounts as may be required according to applicable laws, regulations and directives. | | | | | | |
| I unde | ertake to notify "MGBSL" within 30 calendar days if there is a change in the above information which I have provided to "MGBSL". | | | | | | |
| | | | | | | | |
| Date: | | | | | | | |
| | Signature Signature Signature | | | | | | |

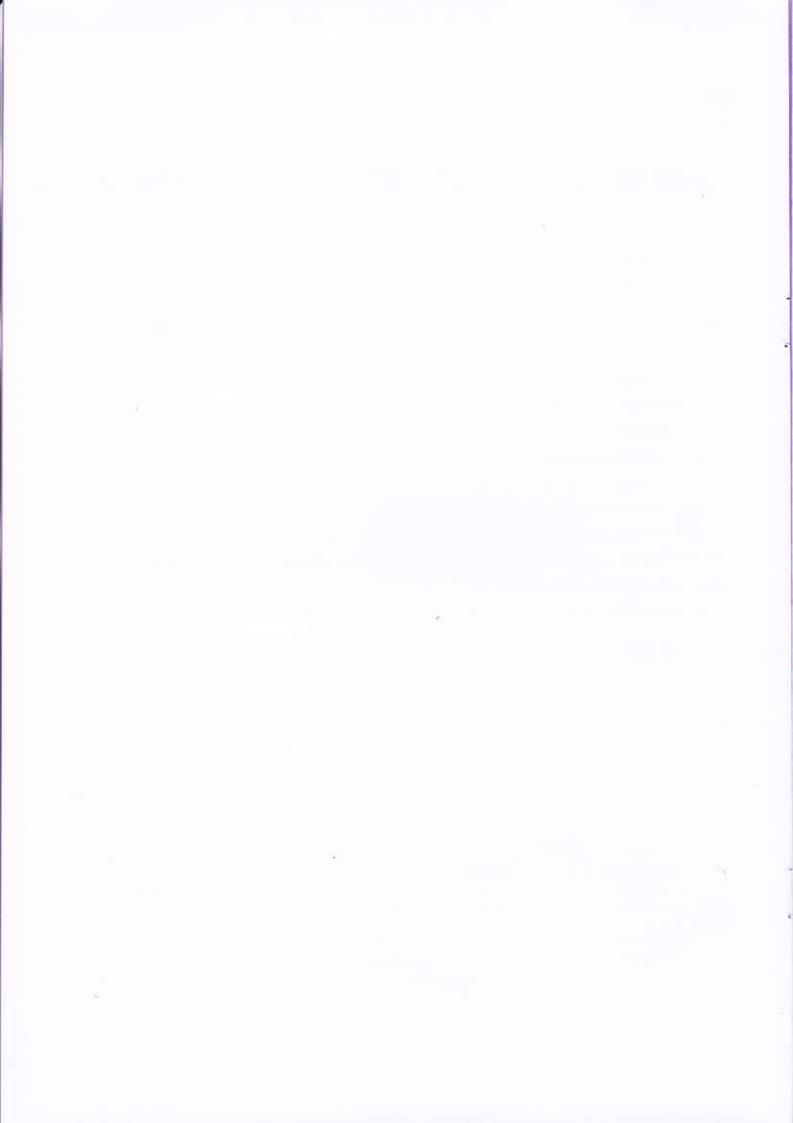
Title & Position of the Signatory with Stamp

On behalf of the Entity

Title & Position of the Signatory with Stamp On behalf of the Entity

Title & Position of the Signatory with Stamp

On behalf of the Entity





Room # 626 (5th Floor), 9/E Motijheel C/A, Dhaka-1000, Telephne: +88 02 9576159 DSE TREC No. 124, BSEC Reg. No. 3,1/DSE-124/2015/537

| | Date: | |
|----------|------------|-------------|
| | | |
| Buy/Sell | Quantity | Price (Tk.) |
| | | |
| | | |
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| MEGHNA BAN | |
|------------|---------|
| SECURITIES | LIMITED |

| S | IG | NA | TA | UI | R | CA | AR | |
|---|----|----|----|----|---|-----|----|--|
| | | | | • | | ~ 1 | | |

| DSE TREC No. 124, BSEC Reg. No. 3.1/D | | Date: |
|---------------------------------------|-----------------------------|-------------------------|
| Customer Accounts No. | ВС | DID No. 1 2 0 2 2 2 0 0 |
| Name of the Account Holder : | | |
| Name of the Joint Account Holder : | 1.50 | |
| Name of the Authorised Person : | | |
| | Mode of operation or n | nandate |
| Particulars | Full Name (In Block Letter) | Singature |
| First Account Holder | | |
| Second Account Holder | | |
| 3rd Applicant (Ltd. Co. Only) | | |
| Authorised Person | | |

PAY IN TRANSFER FORM

Please complete all details in CAPITAL letters. Please fill all names correctly. All communication shall be sent only to the First Name Account Holder correspondence address. Date: 01. Transfer Details 12022200 BO ID No. Exchange ID BO Name: Pay in Quantity Issuer Company ISIN 02 Transfer Details MGBSL Trading ID/Broker Code Name of Broker: 03.Declaration The rules and regulations of the Depository and CDBL Participant pertaining to an account which are in force now have been read by me'us and I/we have understood the same and I/we agree to abide by and to bound by the rules as are in force form time to time for such accounts. If We also declare that the particulars given by melus are true to the best of my/our knowledge as on the date of this transaction. If we further agree that any false/misleading information given by me/us or suppression of any material fact will render my/our account liable for termination and further action. Signature with date Name of applicants/Authorized Signatories in case of Ltd. Co. Applicants First Applicant Second Applicant Third Applicant (Ltd. Co. Only) POA Holder 04. To be filled by the DP B0 ID (Broker Clearing A/C) DPID 2 2 2 0 0 Pay in Quantity Code No. The Pay in Quantity has successfully been transferred to the broker's clearing A/C Name of the CDBL Participant DP Signature Setup Date MEGHNA BANK SECURITIES LIMITED * These fields should be checked and matched with system-generated information





Room # 626 (5th Floor), 9/E Motijheel C/A, Dhaka-1000 Tel: +88 02 9576159, Fax: +88 02 9576159 Email: info@meghnabanksecuritiescom.bd

DSE TREC No. 124, BSEC Reg. No. 3.1/DSE- 124/ 2015/ 537

