

MiFID ACCOUNT OPENING FORM – NATURAL PERSON

APPLICANT INFORMATION

TITLE:	NAME:	SURNAME:	FATHER'S NAME:
I.D./PASSPORT NUMBER:		DATE OF BIRTH:	NATIONALITY:
PASSPORT DETAILS	COUNTRY OF ISSUE:	DATE OF ISSUE:	EXPIRY DATE:
MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> COHABITATION <input type="checkbox"/> DIVORCED/SEPARATED <input type="checkbox"/> WIDOWED			
<input type="checkbox"/> CYPRUS RESIDENT <input type="checkbox"/> NON-RESIDENT		NUMBER OF DEPENDANTS:	AGE OF EACH DEPENDANT:
RESIDENTIAL STATUS: <input type="checkbox"/> OWNER <input type="checkbox"/> TENANT <input type="checkbox"/> WITH PARENTS <input type="checkbox"/> OTHER _____			NO. OF YEARS AT CURRENT ADDRESS:
EDUCATION: <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> COLLEGE <input type="checkbox"/> UNIVERSITY <input type="checkbox"/> POST GRADUATE <input type="checkbox"/> PROFESSIONAL QUALIFICATIONS			
PROFESSION:			YEARS OF SERVICE/SELF-EMPLOYMENT:
EMPLOYER: (If Self-Employed state so):			POSITION:
HOME ADDRESS:			
POSTAL CODE:		TOWN/CITY:	COUNTRY:
WORK ADDRESS:			
POSTAL CODE:		TOWN/CITY:	COUNTRY:
TEL. NO.:	HOME:	WORK:	MOBILE: FAX:
E-MAIL:			
CORRESPONDENCE ADDRESS <input type="checkbox"/> HOME <input type="checkbox"/> WORK <input type="checkbox"/> HOLD MAIL <input type="checkbox"/> OTHER (PLEASE STATE BELOW)			
CORRESPONDENCE POSTAL ADDRESS:			
POSTAL CODE:		TOWN/CITY:	COUNTRY:

FOR INTERNAL USE ONLY

RECEIVED BY: _____ NAME	SIGNATURE _____	DATE : ____/____/____
CHECKED BY: _____ NAME	SIGNATURE _____	DATE : ____/____/____
PROFIT CENTER: _____	COMMISSION: _____	



SELF CERTIFICATION FORM

FATCA INFORMATION	
ARE YOU A U.S. PERSON?	<input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU HOLD A U.S. CITIZENSHIP?	<input type="checkbox"/> YES <input type="checkbox"/> NO
PLACE OF BIRTH:	U.S. TAX IDENTIFICATION NUMBER (TIN)
WERE YOU BORN IN THE STATES OF AMERICA, BUT YOU DO NOT HOLD A U.S. CITIZENSHIP?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, KINDLY CLARIFY:	
DO YOU HOLD A GREEN CARD?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YOUR ANSWER IS YES TO ONE OF THE ABOVE QUESTIONS, PLEASE COMPLETE A W9 FORM OTHERWISE, PLEASE COMPLETE A W8 FORM	<input type="checkbox"/> W8 <input type="checkbox"/> W9

CRS INFORMATION		
COUNTRY OF TAX RESIDENCE	TIN	If no TIN available enter: A - Country of tax residence does not issue TINs to its residents B - Unable to obtain TIN (explain why below) C - No Tin is required by country's authorities
PLEASE EXPLAIN IN THE FOLLOWING BOXES WHY YOU ARE UNABLE TO OBTAIN A TIN IF YOU SELECTED <i>REASON B</i> ABOVE.		
1.		
2.		
APPLICANT'S DECLARATION, AUTHORISATION AND SIGNATURE		

I HEREBY REQUEST AND AUTHORISE MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD – (HEREINAFTER 'THE COMPANY') TO PROVIDE ME WITH ALL THE ACCOUNTS AND SERVICES I WILL REQUEST. I HEREBY CONFIRM THAT I HAVE BEEN INFORMED AND ACCEPT ALL THE TERMS AND CONDITIONS WHICH GOVERN THE PROVISION OF THE REQUESTED ACCOUNTS AND SERVICES. THE INFORMATION DISCLOSED ABOVE IS TRUE AND ACCURATE AND I WILL PROMPTLY NOTIFY THE COMPANY IF ANY OF THE ABOVE PARTICULARS CHANGE OR CEASE TO BE TRUE AND ACCURATE. I ALSO UNDERTAKE TO SUPPLY ANY OTHER INFORMATION THAT MAY BE REQUIRED IN THE FUTURE AND I HEREBY SUBMIT TRUE COPIES OF THE RELEVANT ORIGINAL DOCUMENTS. FURTHERMORE I UNDERSTAND AND AGREE THAT THE INFORMATION ABOVE AND ANY OTHER INFORMATION CONTAINED IN THIS DOCUMENT CAN AND MAY BE DISCLOSED BY THE COMPANY FOR REGULATORY PURPOSES OR BECAUSE OF OTHER STATUTORY OBLIGATIONS AND TO OTHER ENTITIES OF THE COMPANY'S GROUP.

I UNDERSTAND THAT THE INFORMATION SUPPLIED BY ME IS COVERED BY THE FULL PROVISIONS OF THE TERMS AND CONDITIONS GOVERNING THE ACCOUNT HOLDER'S RELATIONSHIP WITH MEGA EQUITY SETTING OUT MEGA EQUITY MAY USE AND SHARE THE INFORMATION SUPPLIED BY ME. I ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS FORM AND INFORMATION REGARDING THE ACCOUNT HOLDER AND ANY REPORTABLE ACCOUNT(S) MAY BE PROVIDED TO THE TAX AUTHORITIES OF THE COUNTRY/JURISDICTION IN WHICH THIS ACCOUNT(S) IS/ARE MAINTAINED AND EXCHANGED WITH TAX AUTHORITIES OF ANOTHER COUNTRY/JURISDICTION OR COUNTRIES/JURISDICTIONS IN WHICH THE ACCOUNT HOLDER MAY BE TAX RESIDENT PURSUANT TO INTERGOVERNMENTAL AGREEMENTS TO EXCHANGE FINANCIAL ACCOUNT INFORMATION.

I CERTIFY THAT I AM THE ACCOUNT HOLDER (OR AM AUTHORISED TO SIGN FOR THE ACCOUNT HOLDER) OF ALL THE ACCOUNT(S) TO WHICH THIS FORM RELATES. I DECLARE THAT ALL STATEMENTS MADE IN THIS DECLARATION ARE, TO THE BEST OF MY KNOWLEDGE AND BELIEF, CORRECT AND COMPLETE.

I UNDERTAKE TO ADVISE MEGA EQUITY WITHIN 30 DAYS OF ANY CHANGE IN CIRCUMSTANCES WHICH AFFECTS THE TAX RESIDENCY STATUS OF THE INDIVIDUAL IDENTIFIED IN THIS FORM OR CAUSES THE INFORMATION CONTAINED HEREIN TO BECOME INCORRECT OR INCOMPLETE, AND TO PROVIDE MEGA EQUITY WITH A SUITABLY UPDATED SELF-CERTIFICATION AND DECLARATION WITHIN 30 DAYS OF SUCH CHANGE IN CIRCUMSTANCES.

APPLICANT'S SIGNATURE

DATE

NOTE: IF YOU ARE NOT THE ACCOUNT HOLDER PLEASE INDICATE THE CAPACITY IN WHICH YOU ARE SIGNING THE FORM. IF SIGNING UNDER A POWER OF ATTORNEY PLEASE ALSO ATTACH A CERTIFIED COPY OF THE POWER OF ATTORNEY.



Appendix – Definitions

“Account Holder” The term “Account Holder” means the person listed or identified as the holder of a Financial Account. A person, other than a Financial Institution, holding a Financial Account for the benefit of another person as an agent, a custodian, a nominee, a signatory, an investment advisor, an intermediary, or as a legal guardian, is not treated as the Account Holder. In these circumstances that other person is the Account Holder. For example in the case of a parent/child relationship where the parent is acting as a legal guardian, the child is regarded as the Account Holder. With respect to a jointly held account, each joint holder is treated as an Account Holder.

“Controlling Person” This is a natural person who exercises control over an entity. Where an entity Account Holder is treated as a Passive Non-Financial Entity (“NFE”) then a Financial Institution must determine whether such Controlling Persons are Reportable Persons. This definition corresponds to the term “beneficial owner” as described in Recommendation 10 of the Financial Action Task Force Recommendations (as adopted in February 2012). If the account is maintained for an entity of which the individual is a Controlling Person, then the “Controlling Person tax residency self-certification” form should be completed instead of this form.

“Entity” The term “Entity” means a legal person or a legal arrangement, such as a corporation, organisation, partnership, trust or foundation.

“Financial Account” A Financial Account is an account maintained by a Financial Institution and includes: Depository Accounts; Custodial Accounts; Equity and debt interest in certain Investment Entities; Cash Value Insurance Contracts; and Annuity Contracts.

“Participating Jurisdiction” A Participating Jurisdiction means a jurisdiction with which an agreement is in place pursuant to which it will provide the information required on the automatic exchange of financial account information set out in the Common Reporting Standard.

“Reportable Account” The term “Reportable Account” means an account held by one or more Reportable Persons or by a Passive NFE with one or more Controlling Persons that is a Reportable Person.

“Reportable Jurisdiction” A Reportable Jurisdiction is a jurisdiction with which an obligation to provide financial account information is in place.

“Reportable Person” A “Reportable Person” is defined as an individual who is tax resident in a Reportable Jurisdiction under the tax laws of that jurisdiction. Dual resident individuals may rely on the tiebreaker rules contained in tax conventions (if applicable) to solve cases of double residence for purposes of determining their residence for tax purposes.

“TIN (including “functional equivalent”) The term “TIN” means Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such jurisdiction. Further details of acceptable TINs can be found at the OECD automatic exchange of information portal at <http://www.oecd.org/tax/automatic-exchange/>.

Some jurisdictions do not issue a TIN. However, these jurisdictions often utilise some other high integrity number with an equivalent level of identification (a “functional equivalent”). Examples of that type of number include, for individuals, a social security/insurance number, citizen/personal identification/service code/number, and resident registration number.

“US Person” A “US Person” means a US citizen or resident individual, a partnership or corporation organized in the United States or under the laws of the United States or any State thereof, a trust if (i) a court within the United States would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust, and (ii) one or more U.S. persons have the authority to control all substantial decisions of the trust, or an estate of a decedent that is a citizen or resident of the United States. This shall be interpreted in accordance with the U.S. Internal Revenue Code.



APPENDIX A

SERVICES PROVIDED

The Services which shall be provided by the IF to the Client are the following:

Investment Services

- ☐ Reception and transmission of orders in relation to one or more of the Financial Instruments,
- ☐ Execution of orders on behalf of Clients,
- ☐ Investment advice

Ancillary Services

- ☐ Safekeeping and administration of financial instruments, including custodianship and related services
- ☐ Granting credits or loans to one or more financial instruments, where the firm granting the credit or loan is involved in the transaction
- ☐ Advice to undertakings on capital structure, industrial strategy and related matters and advice and services relating to mergers and the purchase of undertakings
- ☐ Foreign exchange services where these are connected to the provision of investment services

The Financial Instruments for which the above Services shall be provided are:

- ☐ Transferable securities
- ☐ Money market instruments
- ☐ Units in collective investment undertakings
- ☐ Options, futures, swaps, forward rate agreements and any other derivative contracts
- ☐ Derivative instruments for the transfer of credit risk
- ☐ Financial contracts for differences

APPENDIX B

ROLE OF THE IF WITH RESPECT TO CORPORATE ACTIONS RELATING TO CLIENT FINANCIAL INSTRUMENTS

The IF may instruct the exercise of voting rights or other corporate actions only with agreement or on instructions of Client.

The IF shall not be entitled to procure any corporate action including the exercise of any voting rights attaching to the Portfolio's holding of a collective investment undertaking operated, managed or advised by the IF except with the agreement or on the specific instructions of the Client but shall be entitled to count such holdings for the purposes of constituting a quorum at a meeting of such collective investment undertaking operated, managed or advised by the IF.

MIFID CLIENT CATEGORISATION

For the purpose of offering good service, protection and promotion of your interests, it is important that you provide Mega Equity Securities & Financial Services Public Ltd with Registration No HE107394), License No. 011/03 dated 12th May 2009, with the necessary data regarding yourself. Please take all steps to complete this questionnaire clearly and precisely. This questionnaire aims at classifying you as a Retail or Professional Investor or Eligible Counterparty in accordance with the provisions of the Investment Services and Activities and Regulated Markets Law of 2007 (Law 144(I)/2007).

CLIENT CLASSIFICATION
NATURAL PERSONS

Upon such request, the IF will undertake an assessment of the expertise, experience and knowledge of such client in accordance to its internal policies and procedures. In the course of that assessment, as a minimum, two of the following criteria will need to be satisfied:

- ☐ The client has carried out transactions, in significant size, on the relevant market at an average frequency of 10 per trimester over the previous four quarters,
- ☐ The size of the client's financial instrument portfolio, defined as including cash deposits and financial instruments exceeds EUR 500 000,
- ☐ The client works or has worked in the financial sector financial sector for at least one year in a professional position, which requires knowledge of the transactions or services envisaged.

Professional clients are not entitled to as high level of protection and information as the Retail Clients.

Professional clients are responsible for keeping the IF informed about any change, which could affect their current categorisation. Should the IF become aware however that the client no longer fulfils the initial conditions, which made him eligible for a professional treatment, the IF is obliged to take appropriate action

CLIENT DECLARATION

I/WE HEREBY STATE THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE KAI UNDERTAKE TO PROVIDE SUPPORTING ORIGINAL DOCUMENTATION TO VERIFY THE ABOVE. I/WE ALSO UNDERTAKE TO INFORM THE CIF IMMEDIATELY OF ANY CHANGES.

Client / Authorised Signatory(ies)
Name and I.D. / Passport Number

Signature

Date

1. Name:

I.D. / Passport Number:

2. Name:

I.D. / Passport Number:

FOR MEGA EQUITY SECURITIES & FINANCIAL SERVICES PUBLIC LTD USE ONLY

IN ACCORDANCE WITH THE INFORMATION SUPPLIED AND THE PROVISIONS OF THE CORRESPONDING LEGISLATION THE INVESTOR IS CLASSIFIED AS

☐ RETAIL INVESTOR

☐ PROFESSIONAL INVESTOR

☐ ELIGIBLE COUNTERPARTY

CLASSIFICATION BY: _____ DATE: ____/____/____
NAME SIGNATURE

CHECKED BY: _____ DATE: ____/____/____
NAME SIGNATURE

COMMENTS: _____

For the purpose of offering good service, protection and promotion of your interests, it is important that you provide MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD (Registration No. HE107394) hereinafter (M.E.) with the necessary data regarding yourself. Please take all steps to complete, as clearly and precisely as possible, this form. The form aims to provide MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD the required information in accordance with the provisions of the Investment Services and Activities and Regulated Markets Law of 2017 (Law 87(I)/2017), the Commission Delegated Regulation (EU) 2017/565 of 25 April 2016 supplementing Directive 2014/65/EU of the European Parliament and of the Council as regards organizational requirements and operating conditions for investment firms and defined terms for the purposes of that Directive for the purposes of the assessment of suitability of investment services, financial instruments and products and Directive DI144-2007-02 of 2012 for the professional competence of investment firms.

INCOME AND EXPENDITURE (ALL FIGURES TO BE GIVEN IN € EURO)				
Regular Monthly Income		Source	Extent	Regular Monthly Payments/Financial Commitments
Applicants Net Income				Rent/Housing Loan payment
Spouse's Net Income (if applicable)				Other Loan Payments
Other Regular Income (specify below)				Life Insurances
1.				Family Budget
2.				Other Regular Expenditure (specify below)
3.				1.
4.				2.
TOTAL (A)				TOTAL (B)
Regular Yearly Income (specify below)		Regular Yearly Expenditure (specify below)		
1.				1. Insurances (Car, building etc)
2.				2.
3.				3.
TOTAL (C)				TOTAL (D)
MONTHLY AVAILABLE INCOME (A-B) _____(E)				YEARLY AVAILABLE INCOME (12xE + C – D) _____
DETAILS OF REAL ESTATE PROPERTY				
Area / Country	Description of Property	% Owned	Current Value	Amount Mortgaged
TOTAL PROPERTY VALUE _____, TOTAL MORTGAGED AMOUNT _____, TOTAL NET VALUE _____				
MOVABLE PROPERTY				
Brief Description (e.g. cars)	Total Estimated Value	Amount Charged	Total Net Value	
INVESTMENTS				
Asset Description	Own / Joint	Purchase Value	Current Value	Amount Pledged
Shares (traded/listed)				
Mutual Funds				
Capital Guarantee Products				
Bonds				



Other Investments				
TOTAL INVESTMENTS VALUE _____, TOTAL AMOUNT PLEDGED _____, TOTAL NET VALUE _____				
LIFE INSURANCES				
Insurance Type	Insurance Amount	Total yearly premium	Expiration Date	Surrender Value
TOTAL INSURED AMOUNT: _____, SURRENDER VALUE: _____, PLEDGED AMT: _____, NET VALUE: _____				
CASH DEPOSITS WITH BANKS, FINANCIAL INSTITUTIONS ETC				
Total Amount of Own Cash		Amount Pledged		Available Cash
Total Amount of Joint Cash		Amount Pledged		Available Cash
LIABILITIES TOWARDS BANKS/FINANCIAL INSTITUTIONS/THIRD PARTIES				
Type of Account	Borrower (Own/Joint)	Monthly Installment	Limit/Initial Amount	Balance
PERSONAL GUARANTEES				
Have you ever signed personal guarantees for the benefit of a third party? (if yes, complete below):				<input type="checkbox"/> YES <input type="checkbox"/> NO
Personal Guarantee for:		Amount of Guarantee:	Expiration Date:	
Personal Guarantee for:		Amount of Guarantee:	Expiration Date:	
OTHER INFORMATION				
Has a court order for bankruptcy or any other order been ever issued or is one still pending against you with regards to your financial duties? (if yes, attach details on a separate sheet)				<input type="checkbox"/> YES <input type="checkbox"/> NO
Is there any other material information relating to your financial status or personal circumstances you would like to state? (If yes use space below)				<input type="checkbox"/> YES <input type="checkbox"/> NO
CUSTOMER DECLARATION				
I HEREBY STATE THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE KAI UNDERTAKE TO PROVIDE SUPPORTING ORIGINAL DOCUMENTATION TO VERIFY THE ABOVE. I ALSO UNDERTAKE TO INFORM IMMEDIATELY OF ANY CHANGES.				
Name and I.D. / Passport Number		Signature		Date
1. Name: _____ I.D. / Passport Number: _____				

MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD USE ONLY

RECEIVED BY: _____ NAME _____ SIGNATURE _____ DATE : ____/____/____

CHECKED BY: _____ NAME _____ SIGNATURE _____ DATE : ____/____/____

COMMENTS : _____



Please complete this questionnaire answering all questions and providing true, accurate and up-to-date information in a clear and precise manner. MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD (Registration No. HE107394) ("M.E."), will rely on the information you will provide for the purposes of the assessment of appropriateness. The reason for requesting information on your knowledge and experience is to enable MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD, to assess whether the investment services or products or transactions envisaged, including their complexity and the risks involved, are appropriate for you.

GENERAL QUESTIONS	ANSWER	FOR M.E. LTD USE ONLY
1. What is your total regular net annual income		
2. What is the best estimate of your Net Worth (Assets minus Liabilities)		
3. What is the value of your current investment portfolio		
4. What is the desired period of your investments (select all that apply)		
a. Very Short Term → 0-1 Year		
b. Short Term → > 1-3 Years		
c. Medium Term → > 3-5 years		
d. Long Term → > 5 years		
5. What is your expected yearly return for your investments		
Low → 3% – 4%		
Average → 5% – 7%		
Above average → 8% – 12%		
High → > 12%		
6. Which of the following risk profiles corresponds better to your investment objectives		
Preservation of capital: no exposure to market risk		
Secure investment: low exposure to market risk		
Medium term growth: moderate exposure to market risk		
Performance objective: substantial exposure to market risk		
Speculation: high exposure to market risk		
7. What type of financial and other investment instruments you are familiar with / you have invested in (select all that apply and indicate 1→ familiar with, 2→ invested in)		COMPLEX / NON COMPLEX
Cash		
Money Market Funds		
Capital Guarantee Products		
Government Bonds		
Listed Corporate Bonds, Bond Funds and other fixed income securities		
Listed Equities and Equity Funds		
Exchange Traded Funds		
Private Equity/Venture Capital		
Non-Listed Corporate Bonds, Private Debt		
Derivatives (Options, Futures etc)		
Foreign Currency		
Real Estate Property		
Physical Gold and Other Precious Metals		
Commodities		
Cryptocurrencies		
8. In what markets have you already invested (select all that apply)		
None, we have not previously done any investments		
Home country		



GENERAL QUESTIONS					ANSWER	FOR M.E. LTD USE ONLY
Developed markets (e.g. USA, Japan and Western Europe)						
Emerging Markets						
9. On the basis of which investment services have you already invested (select all that apply)						
Brokerage services/execution only, I/we decide on my/our own where to invest						
Based on general investment advice received						
Based on investment advice received for specific investments						
Discretionary Asset Management through a Portfolio Manager						
10. What is the average value of your financial transactions in each of the following financial instruments						
	Equities	Fixed Income	Investment Funds	Derivatives/C FDs		
Less than €20,000						
€20,001 – €50,000						
€50,001 – €200,000						
€200,001 – €1,000,000						
Over €1,000,000						
11a. How many transactions have you performed yearly on average in each of the last 5 years in each of the following financial instruments						
	Equities	Fixed Income	Investment Funds	Derivatives/C FDs		
None						
Less than 10						
11 – 50						
51 – 100						
Over 100						
11b. How many of these were performed in the last year						
12. What is the desired level of liquidity of your investment portfolio						
Fully liquid - all investments can be easily converted to cash						
Mainly liquid - a large percentage of the investments can be easily converted to cash						
Somewhat liquid - the investments are split between easily convertible to cash and not easily convertible to cash						
Somewhat illiquid - A large percentage of the investments may not be easily convertible to cash						
Illiquid - Most of the investments may not be easily convertible to cash or there is a penalty for doing so						
Indifferent for liquidity – investments may vary and can be a mixture						
13. Primary purposes of your investments (select all that apply)						
Capital Preservation						
Produce regular income						
Produce occasional income						
Produce a combination of income and capital growth						
Growth of capital with little or no income						
Indifferent for either income or capital growth, can be a combination or a mixture						
14. Would you consider any level of gearing / margin for your portfolio						



GENERAL QUESTIONS	ANSWER	FOR M.E. LTD USE ONLY
None		
≤ 25%		
26% - 50%		
51% - 75%		
Maximum % that can be obtained - I/we may provide investment directions		
Yes, for a specific investment, I/we may provide investment directions		
15. In which of the following services would you be interested in? (select all that apply)		
Brokerage Services/Execution Only, I/we decide on my/our own where to invest		
General investment advice		
Investment advice for specific investments		
Discretionary Asset Management through a Portfolio Manager		
Combination of Brokerage Services/Execution Only and investment advice		
Combination of Brokerage Services/Execution Only and Discretionary Asset Management		
Combination of Brokerage Services/Execution Only, investment advice and Discretionary Asset Management		
16. Would you consider exposure to OTC financial and other investment instruments acknowledging that such instruments may contain specific and/or excessive degree of risk		
No		
Yes		
17. Please indicate the possibility to be invested in up to 100% in a single type of investments and/or in a single financial or other investment instrument		
No		
Yes		
18. When do you plan to withdraw principal (initial capital invested) from your investment portfolio		
In less than 1 year		
Within >1 – 3 years		
Within >3 – 5 years		
After 5 years		
Currently I/we do not plan to withdraw principal		
19. If you plan to withdraw principal from your investment portfolio, what portion do you anticipate withdrawing annually		
Currently I/we do not plan to withdraw principal		
Less than 10%		
Between 11% and 25%		
Between 26% and 50%		
Between 51% and 75%		
Between 76% and 100%		
20. What is your financial ability to bear losses on your total investment portfolio		
Can bear only the minimum possible losses (less than 5% of the portfolio)		
Can bear losses between 5% and 10% of the portfolio		
Can bear losses between 11% and 20% of the portfolio		
Can bear losses between 21% and 30% of the portfolio		
Can bear losses between 31% and 50% of the portfolio		
Can bear losses between 51% and 75% of the portfolio		



GENERAL QUESTIONS	ANSWER	FOR M.E. LTD USE ONLY
Can bear losing the entire value of the portfolio		
21. What would you consider to be your overall risk level profile		
Not willing to take any investment risk which may result in any loss of initial capital even in adverse market conditions.		
Willing to undertake minor investment risk so that to aim mainly for capital preservation. In adverse market conditions minor losses may occur with only minimal percentage of the initial capital been unrecoverable.		
Willing to undertake some investment risk and small market volatility in order to achieve average returns. In adverse market conditions moderate losses may occur and a small percentage of the initial capital may be unrecoverable.		
Willing to undertake a considerable risk and accept market volatility in order to enhance potential returns. In adverse market conditions, negative returns and possibly unrecoverable loss of a certain percentage of the initial investment capital may occur.		
Willing to undertake a large degree of investment risk in order to achieve high potential returns. In adverse market conditions a substantial and possibly unrecoverable loss of a large percentage of the initial investment capital may occur.		
22. Are you willing to take selective investments risks with parts of your investment portfolio for specific investments which generally fall outside your general overall risk profile?		
No		
Yes		

Please state any investments you would consider inappropriate to invest in, any legal, moral, ethical or tax-related constraints, or any other investment concerns, limitations or conflicts you would like to address and/or other material information you would like to provide (continue in an additional separate sheet if required).

Please state any other material information you would like to provide.

CUSTOMER DECLARATION

I HEREBY STATE THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE KAI UNDERTAKE TO PROVIDE SUPPORTING ORIGINAL DOCUMENTATION TO VERIFY THE ABOVE. I ALSO UNDERTAKE TO INFORM IMMEDIATELY OF ANY CHANGES.

Name and I.D. / Passport Number

Signature

Date

1. Name:

I.D. / Passport Number:

MEGA EQUITY SECURITIES AND FINANCIAL SERVICES PUBLIC LTD USE ONLY

RECEIVED BY: _____ NAME _____ SIGNATURE _____ DATE : ____/____/____

CHECKED BY: _____ NAME _____ SIGNATURE _____ DATE : ____/____/____

COMMENTS : _____

