

ACCOUNT OPENING FORM (FOR JOINT ACCOUNT)

In this form, SWHYS shall mean Shenwan Hongyuan Securities (H.K.) Limited and SWHYF shall mean Shenwan Hongyuan Futures (H.K.) Limited.

1. ACCOUNT TYPE

(More than one option can be chosen)

☐ 1. Cash Account ☐ 2. Margin Account ☐ 3. Stock Options Account ^{Note 1} ☐ 4. Futures Account

(Please ✓ the appropriate box)

With Online Services? ☐ Yes, please provide the mobile no. in the applicant information for receiving One-Time Password (OTP).
☐ No

Note 1: Stock Options Account must be opened together with Cash Account/Margin Account.

To be completed by First Joint Applicant (Section 2-5)

2. FIRST JOINT APPLICANT INFORMATION

Personal Information			
Name (English)	(Surname)	(Given Name)	
		(Required Field)	
Name (Chinese)	(姓)	(名)	
		(Required Field)	
Hong Kong Identity Card No. ^{Note 2}		Other Identity Card No. ^{Note 2}	
Passport No. ^{Note 2}		Nationality	
Date of Birth	(Required Field)	Home Tel. No.	() Country Code Telephone no.
Mobile No. ¹	() Country Code Telephone no. (Required Field for Online Services)	Mobile No. ²	() Country Code Telephone no. (Optional Field)
Residential Address	(Required Field)		

Note 2: Please provide at least one of the identity document numbers.

Employment Status	
Employment Status (Please ✓ where appropriate)	<input type="checkbox"/> Self-employed <input type="checkbox"/> Employed <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Not Currently Employed
Occupation / Position	(Required Field if Employment Status is Self-employed/Employed)
Name of Employer / Self-owned Business	(Required Field if Employment Status is Self-employed/Employed)
Office Address	(Optional Field if Employment Status is Self-employed/Employed)
Office Tel No.	(Optional Field if Employment Status is Self-employed/Employed)
Nature of Business (If the Employment Status is Self-employed / Employed, please ✓ where appropriate)	<input type="checkbox"/> Utilities <input type="checkbox"/> Construction/Retail Estate/Engineering <input type="checkbox"/> Finance/Insurance <input type="checkbox"/> Import/Export/Wholesale <input type="checkbox"/> Legal <input type="checkbox"/> Communications <input type="checkbox"/> Business Services <input type="checkbox"/> Science & Technology <input type="checkbox"/> Gambling <input type="checkbox"/> Ammunition and weapons manufacturers <input type="checkbox"/> Union & Organizations <input type="checkbox"/> Leisure & Entertainment <input type="checkbox"/> Transport <input type="checkbox"/> Logistics <input type="checkbox"/> Public Services <input type="checkbox"/> Personal & Household Services <input type="checkbox"/> Health Care <input type="checkbox"/> Manufacturing <input type="checkbox"/> Sports Activities <input type="checkbox"/> Amusement & Recreation Services <input type="checkbox"/> Industrial <input type="checkbox"/> Education <input type="checkbox"/> Travel & Tourism <input type="checkbox"/> Hotel/Boarding Houses <input type="checkbox"/> Retail <input type="checkbox"/> Restaurants <input type="checkbox"/> Charity (non-Government Bodies) <input type="checkbox"/> Hairdressing & Beauty <input type="checkbox"/> Government Sector <input type="checkbox"/> Others (please specify): _____

Financial Status	
Personal Annual Income	<input type="checkbox"/> Below HK\$300,000 <input type="checkbox"/> HK\$300,000 - HK\$800,000 <input type="checkbox"/> HK\$800,001 - HK\$1,200,000 <input type="checkbox"/> Above HK\$1,200,000 (Required Field)
Personal Net Worth	<input type="checkbox"/> Below HK\$1,000,000 <input type="checkbox"/> HK\$1,000,000 - HK\$8,000,000 <input type="checkbox"/> HK\$8,000,001 - HK\$20,000,000 <input type="checkbox"/> Above HK\$20,000,000 (Required Field)
Source(s) of Funds (More than one option can be chosen)	<input type="checkbox"/> Salary / Commission <input type="checkbox"/> Savings <input type="checkbox"/> Investment Income <input type="checkbox"/> Sale of Real Estate <input type="checkbox"/> Own Business <input type="checkbox"/> Others (Please specify: _____) (Required Field)
Source(s) of Wealth (More than one option can be chosen)	<input type="checkbox"/> Business Income <input type="checkbox"/> Salary/Pension <input type="checkbox"/> Investment Income <input type="checkbox"/> Inheritance/Gift <input type="checkbox"/> Others (Please specify: _____) (Required Field)

Investment Experience	
(The year of investment experience of all the following investment products must be filled in. If you have never invested in the relevant investment products, please fill in "0")	
<input type="checkbox"/> Stock: _____ year(s)	<input type="checkbox"/> Warrants: _____ year(s) <input type="checkbox"/> Options: _____ year(s) <input type="checkbox"/> Futures: _____ year(s)

3. IDENTITY DECLARATION BY FIRST JOINT APPLICANT (Required Field)

- 3.1 Are you a U.S. citizen or resident?
☐ No ☐ Yes U.S. Taxpayer ID No.: _____
If Yes, do you consent for us to report your relevant account balance, gross amounts of relevant interest incomes, dividend incomes and withdrawals, and identification details (e.g. name, address, the U.S. Taxpayer ID No.) to U.S. Internal Revenue Service annually?
☐ Yes ☐ No
- 3.2 Are you and/or your spouse, partner, children or parents or close associates a Politically Exposed Person ("PEP")?
(Note: PEP refers to a person entrusted with a prominent public function including a head of state, head of government, senior politician, senior executive of a state-owned corporation and an important political party official, which is more specifically defined under the Anti-Money Laundering and Counter-Terrorist Financing Ordinance (Cap. 615 of the Laws of Hong Kong).)
☐ No ☐ Yes, please specific the name of PEP: _____ Relationship: _____
Title of Public Office: _____ Place of Public Office: _____
- 3.3 Are you a director or substantial shareholder of any listed company?
☐ No ☐ Yes, I am a ☐ director / ☐ substantial shareholder. Name of listed company: _____
Place of Listing: _____ Shareholding (if applicable): _____
- 3.4 Are you a licensed/registered person or employee/director of a corporation licensed/registered with the Securities and Futures Commission of Hong Kong ("SFC")?
☐ No ☐ Yes, please specific the name of licensed/registered corporation: _____
- 3.5 Are you an employee or director of SWHYS/SWHYF or its holding company or any of the subsidiaries of the holding company or a relative of any director or employee of SWHYS/SWHYF or its holding company or any of the subsidiaries of the holding company?
☐ No ☐ Yes, please specific the name of director/employee: _____ Relationship: _____

(For Margin Account and Futures Account Only)

- 3.8 Does your spouse have a margin account with SWHYS or a futures account with SWHYF?
☐ N/A ☐ No ☐ Yes Name of spouse: _____ ID no.: _____ Account no.: _____
- 3.9 Do you or together with your spouse control 35% or more of the voting rights of another corporate margin account client of SWHYS or corporate futures account client of SWHYF?
☐ No ☐ Yes Name of client: _____ Account no.: _____

4. DECLARATION FOR AUTOMATIC EXCHANGE OF FINANCIAL ACCOUNT INFORMATION (FIRST JOINT APPLICANT) (Required Field)

If you have any questions about this section or definition of your tax residency, please contact your tax advisor, or the relevant tax authority. You can obtain further details, including a list of jurisdictions that have signed the Automatic Exchange of Information ("AEOI") Agreement and the relevant information requested to be exchange, from the AEOI website of Organisation for Economic Co-operation and Development ("OECD"). Complete the following table indicating (1) the jurisdictions of residence (including Hong Kong) where you are a resident for tax purposes and (2) Your TIN for each jurisdiction indicated. Indicate all (not restricted to three) jurisdictions of residence. If you are a tax resident of Hong Kong, the TIN is the Hong Kong Identity Card Number. If you are a tax resident of People's Republic of China, the TIN is the PRC Identity Card Number. If a TIN is unavailable, provide the appropriate reason A, B or C:

Reason A – The jurisdiction where you are a resident for tax purposes does not issue TINs to its residents.

Reason B – You are unable to obtain a TIN. Explain why you are unable to obtain a TIN if you have selected this reason.

Reason C – TIN is not required. Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.

Jurisdiction of Residence	TIN	Enter Reason A, B or C if no TIN is available	Explain why the account holder is unable to obtain a TIN if you have selected Reason B

5. KNOWLEDGE OF DERIVATIVE PRODUCTS ^{Note 3} (FIRST JOINT APPLICANT)

(If the applicant will trade derivative products, this section is required)

- 5.1 Do you understand the main features of derivative products and risks involved in derivatives products transactions?
☐ Yes ☐ No
- 5.2 Have you ever undergone any training or attended any courses on derivative products?
☐ No ☐ Yes, please specify the name of relevant training/course: _____ Date of Attendance: _____
Organisers of the relevant training/course: _____
- 5.3 Have you ever obtained any working experience relating to derivative products?
☐ No ☐ Yes, please specify the name of employer: _____ Years of Service: _____ (Years)
Title/Position: _____ Job Nature: _____
- 5.4 Have you ever executed 5 or more transactions relating to derivative products over the past 3 years?
☐ No ☐ Yes, please specify the name of financial institution used to execute the relevant derivative products transactions: _____

Note 3: Derivative products include warrants, callable bull/bear contracts, equity-linked notes, synthetic exchange traded funds, stock options, futures and such other products embedded with derivatives.
If the applicant replies "No" to all question 5.1 to 5.4, the account will not be allowed to purchase derivative products.

To be completed by Second Joint Applicant (Section 6-9)

6. SECOND JOINT APPLICANT INFORMATION			
Personal Information			
Name (English)	(Surname)	(Given Name)	
		(Required Field)	
Name (Chinese)	(姓)	(名)	
		(Required Field)	
Hong Kong Identity Card No. ^{Note 4}		Other Identity Card No. ^{Note 4}	
Passport No. ^{Note 4}		Nationality	
Date of Birth	(Required Field)	Home Tel. No.	() Country Code Telephone no.
Mobile No. ¹	() Country Code Telephone no. (Required Field for Online Services)	Mobile No. ²	() Country Code Telephone no. (Optional Field)
Residential Address	(Required Field)		
Note 4: Please provide at least one of the identity document numbers.			
Employment Status			
Employment Status (Please ✓ where appropriate)	<input type="checkbox"/> Self-Employed <input type="checkbox"/> Employed <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Not Currently Employed		
Occupation / Position	(Required Field if Employment Status is Self-employed/Employed)		
Name of Employer / Self-owned Business	(Required Field if Employment Status is Self-employed/Employed)		
Office Address	(Optional Field if Employment Status is Self-employed/Employed)		
Office Tel No.	(Optional Field if Employment Status is Self-employed/Employed)		
Nature of Business (If the Employment Status is Self-employed / Employed, please ✓ where appropriate)	<input type="checkbox"/> Utilities <input type="checkbox"/> Construction/Retail Estate/Engineering <input type="checkbox"/> Finance/Insurance <input type="checkbox"/> Import/Export/Wholesale <input type="checkbox"/> Legal <input type="checkbox"/> Communications <input type="checkbox"/> Business Services <input type="checkbox"/> Science & Technology <input type="checkbox"/> Gambling <input type="checkbox"/> Ammunition and weapons manufacturers <input type="checkbox"/> Union & Organizations <input type="checkbox"/> Leisure & Entertainment <input type="checkbox"/> Transport <input type="checkbox"/> Logistics <input type="checkbox"/> Public Services <input type="checkbox"/> Personal & Household Services <input type="checkbox"/> Health Care <input type="checkbox"/> Manufacturing <input type="checkbox"/> Sports Activities <input type="checkbox"/> Amusement & Recreation Services <input type="checkbox"/> Industrial <input type="checkbox"/> Education <input type="checkbox"/> Travel & Tourism <input type="checkbox"/> Hotel/Boarding Houses <input type="checkbox"/> Retail <input type="checkbox"/> Restaurants <input type="checkbox"/> Charity (non-Government Bodies) <input type="checkbox"/> Hairdressing & Beauty <input type="checkbox"/> Government Sector <input type="checkbox"/> Others (please specify): _____		
Financial Status			
Personal Annual Income	<input type="checkbox"/> Below HK\$300,000 <input type="checkbox"/> HK\$300,000 - HK\$800,000 <input type="checkbox"/> HK\$800,001 – HK\$1,200,000 <input type="checkbox"/> Above HK\$1,200,000 (Required Field)		
Personal Net Worth	<input type="checkbox"/> Below HK\$1,000,000 <input type="checkbox"/> HK\$1,000,000 - HK\$8,000,000 <input type="checkbox"/> HK\$8,000,001 – HK\$20,000,000 <input type="checkbox"/> Above HK\$20,000,000 (Required Field)		
Source(s) of Funds (More than one option can be chosen)	<input type="checkbox"/> Salary / Commission <input type="checkbox"/> Savings <input type="checkbox"/> Investment Income <input type="checkbox"/> Sale of Real Estate <input type="checkbox"/> Own Business <input type="checkbox"/> Others (Please specify: _____) (Required Field)		
Source(s) of Wealth (More than one option can be chosen)	<input type="checkbox"/> Business Income <input type="checkbox"/> Salary/Pension <input type="checkbox"/> Investment Income <input type="checkbox"/> Inheritance/Gift <input type="checkbox"/> Others (Please specify: _____) (Required Field)		
Investment Experience			
(The year of investment experience of all the following investment products must be filled in. If you have never invested in the relevant investment products, please fill in “0”)			
<input type="checkbox"/> Stock: _____ year(s) <input type="checkbox"/> Warrants: _____ year(s) <input type="checkbox"/> Options: _____ year(s) <input type="checkbox"/> Futures: _____ year(s)			

7. IDENTITY DECLARATION BY SECOND JOINT APPLICANT (Required Field)
<p>7.1 Are you a U.S. citizen or resident? <input type="checkbox"/> No <input type="checkbox"/> Yes U.S. Taxpayer ID No.: _____ If Yes, do you consent for us to report your relevant account balance, gross amounts of relevant interest incomes, dividend incomes and withdrawals, and identification details (e.g. name, address, the U.S. Taxpayer ID No.) to U.S. Internal Revenue Service annually? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>7.2 Are you and/or your spouse, partner, children or parents or close associates a Politically Exposed Person (“PEP”)? (Note: PEP refers to a person entrusted with a prominent public function including a head of state, head of government, senior politician, senior executive of a state-owned corporation and an important political party official, which is more specifically defined under the Anti-Money Laundering and Counter-Terrorist Financing Ordinance (Cap. 615 of the Laws of Hong Kong).) <input type="checkbox"/> No <input type="checkbox"/> Yes, please specific the name of PEP: _____ Relationship: _____ Title of Public Office: _____ Place of Public Office: _____</p>

7.3 Are you a director or substantial shareholder of any listed company?
☐ No ☐ Yes, I am a ☐ director / ☐ substantial shareholder. Name of listed company: _____
Place of Listing: _____ Shareholding (if applicable): _____

7.4 Are you a licensed/registered person or employee/director of a corporation licensed/registered with the Securities and Futures Commission of Hong Kong ("SFC")?
☐ No ☐ Yes, please specific the name of licensed/registered corporation: _____

7.5 Are you an employee or director of SWHYS/SWHYF or its holding company or any of the subsidiaries of the holding company or a relative of any director or employee of SWHYS/SWHYF or its holding company or any of the subsidiaries of the holding company?
☐ No ☐ Yes, please specific the name of director/employee: _____ Relationship: _____

(For Margin Account and Futures Account Only)

7.6 Does your spouse have a margin account with SWHYS or a futures account with SWHYF?
☐ N/A ☐ No ☐ Yes Name of spouse: _____ ID no.: _____ Account no.: _____

7.7 Do you or together with your spouse control 35% or more of the voting rights of another corporate margin account client of SWHYS or corporate futures account client of SWHYF?
☐ No ☐ Yes Name of client: _____ Account no.: _____

8. DECLARATION FOR AUTOMATIC EXCHANGE OF FINANCIAL ACCOUNT INFORMATION (SECOND JOINT APPLICANT) (Required Field)

If you have any questions about this section or definition of your tax residency, please contact your tax advisor, or the relevant tax authority. You can obtain further details, including a list of jurisdictions that have signed the Automatic Exchange of Information ("AEOI") Agreement and the relevant information requested to be exchange, from the AEOI website of Organisation for Economic Co-operation and Development ("OECD"). Complete the following table indicating (1) the jurisdictions of residence (including Hong Kong) where you are a resident for tax purposes and (2) Your TIN for each jurisdiction indicated. Indicate all (not restricted to three) jurisdictions of residence. If you are a tax resident of Hong Kong, the TIN is the Hong Kong Identity Card Number. If you are a tax resident of People's Republic of China, the TIN is the PRC Identity Card Number. If a TIN is unavailable, provide the appropriate reason A, B or C:

Reason A – The jurisdiction where you are a resident for tax purposes does not issue TINs to its residents.

Reason B – You are unable to obtain a TIN. Explain why you are unable to obtain a TIN if you have selected this reason.

Reason C – TIN is not required. Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.

Jurisdiction of Residence	TIN	Enter Reason A, B or C if no TIN is available	Explain why the account holder is unable to obtain a TIN if you have selected Reason B

9. KNOWLEDGE OF DERIVATIVE PRODUCTS Note 5 (SECOND JOINT APPLICANT)
(If the applicant will trade derivative products, this section is required)

9.1 Do you understand the main features of derivative products and risks involved in derivatives products transactions?
☐ Yes ☐ No

9.2 Have you ever undergone any training or attended any courses on derivative products?
☐ No ☐ Yes, please specify the name of relevant training/course: _____ Date of Attendance: _____
Organisers of the relevant training/course: _____

9.3 Have you ever obtained any working experience relating to derivative products?
☐ No ☐ Yes, please specify the name of employer: _____ Years of Service: _____ (Years)
Title/Position: _____ Job Nature: _____

9.4 Have you ever executed 5 or more transactions relating to derivative products over the past 3 years?
☐ No ☐ Yes, please specify the name of financial institution used to execute the relevant derivative products transactions: _____

Note 5: Derivative products include warrants, callable bull/bear contracts, equity-linked notes, synthetic exchange traded funds, stock options, futures and such other products embedded with derivatives. If the applicant replies "No" to all question 9.1 to 9.4, the account will not be allowed to purchase derivative products.

To be jointly completed by the Applicant (Section 10-13)

10. ACCOUNT INVESTMENT OBJECTIVES (Required Field)

Investment Objectives (Please ✓ where appropriate)	<input type="checkbox"/> Conservative <input type="checkbox"/> Growth <input type="checkbox"/> Aggressive
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11. ACCOUNT CORRESPONDENCE INFORMATION (Required Field)

Correspondence Address (Please ✓ where appropriate)	<input type="checkbox"/> Same as Residential Address <input type="checkbox"/> Same as Office Address <input type="checkbox"/> Others (Please fill in below)
Language (Please ✓ where appropriate)	<input type="checkbox"/> Chinese <input type="checkbox"/> English
Statement Delivery Method (Please ✓ where appropriate)	<input type="checkbox"/> By Email, email address: _____ <input type="checkbox"/> By Post (Same as Correspondence Address) (Postal fee will be charged if postal statement is requested. Please refer to service charges in official website for details.)

12. RECEIVING BANK ACCOUNT (FOR FUND WITHDRAWAL PURPOSE) Note 6

(This section is not required field, but please attention to Note 6)

Currency	Bank Name	Bank Account No.	Bank Account Name
<input type="checkbox"/> HKD <input type="checkbox"/> Multi Currency <input type="checkbox"/> Other: _____			
<input type="checkbox"/> HKD <input type="checkbox"/> Multi Currency <input type="checkbox"/> Other: _____			

Note 6: If the applicant chooses to provide the bank account number in this section, the bank account name must be the same as the name of account holder. Please provide supporting document of the registered bank account, e.g. bank statement.

13. IDENTITY DECLARATION (Required Field)**13.1 Are you the ultimate beneficiary of the Account?**

(Note: Ultimate beneficiary of the Account means the person or entity that stands to gain the commercial or economic benefit of a transaction and/or bear its commercial or economic risk.)

☐ Yes ☐ No Note 7, please state the name of ultimate beneficiary: _____ Relationship: _____

Note 7: Ultimate beneficiary is required to provide identity document, address proof and contact phone number.

13.2 Are you the person ultimately responsible for originating the instruction in relation to transactions in the Account?

☐ Yes ☐ No Note 8, please state the name of ultimately responsible person: _____ Relationship: _____

Note 8: The person ultimately responsible for originating the instruction is required to provide identity document, address proof and contact phone number.

14. AUTHORISATION, UNDERTAKING, DECLARATION AND EXECUTION

In connection with this account opening application with either SWHYS and/or SWHYF (the “Broker”) (as the case may be) (the “Application”), we (the “Applicant”) hereby authorise, undertake, declare and acknowledge as follows (terms not defined herein shall have the same meanings as in the Terms and Conditions for the relevant account(s) that we open with the Broker):

General

- We hereby authorise the Broker to obtain at any time references and account balances from our bankers (we hereby waive any duty of confidentiality involved) and to contact any other persons to check the information provided in this Account Opening Form and in relation to the Application. Further, we hereby authorise the Broker to conduct credit enquiries and checks for the purpose of ascertaining our financial situation and investment objectives.
- We declare that all information provided in this Account Opening Form and all supporting and relevant documents submitted by us to the Broker in relation to this Application is true, complete, accurate and up-to-date. The Broker is entitled to rely fully on such information for all purposes unless the Broker has received actual prior notice in writing of any change from us.
- We undertake that we shall advise the Broker forthwith of any changes to the information supplied in this Account Opening Form and in relation to the Application. We undertake to provide any further information/documents that the Broker may require from time to time and to ensure at all times the truthfulness, the completeness, the accuracy and the up-to-dateness of all information provided by us to the Broker in relation to this Application.
- We confirm our understanding that if we wish, we may request a signed copy of this Account Opening Form from the Broker. A standard form of this Account Opening Form is also available for downloading from the Broker’s website. We acknowledge receipt of copies of (i) the Terms and Conditions; (ii) the PDPO Circular; and (iii) the Risk Disclosure Statements and Disclaimers, in relation to this Application in a language of our choice (English or Chinese). These documents, together with the Account Opening Form, are collectively referred to hereinafter as the “Client Agreement”.
- We declare that we have been advised to read the Client Agreement carefully, to ask questions and to take independent advice if we wish.
- We further declare that we have read the Client Agreement thoroughly; that we accept and agree to be bound thereby, in particular, the creation of the Broker’s Charge as detailed in the relevant Terms and Conditions; and that where the Account Opening Form is signed before a licensed person, the contents of the Client Agreement have been explained to us fully and clearly in a language which we understand. We agree and confirm that this Account Opening Form and the documents supplied/to be supplied together with this Account Opening Form shall form an integral part of the agreement between the Broker and us.
- We understand and agree that the provisions of the relevant Terms and Conditions, the PDPO Circular and the Risk Disclosure Statements and Disclaimers may be amended, supplemented or revised from time to time by the Broker by way of notice and we recognise that we may at any time ask for a copy of each of the up-to-date Terms and Conditions, the PDPO Circular and the Risk Disclosure Statements and Disclaimers for perusal.
- Where we intend to appoint people other than us to operate the account, we understand that we shall execute a “Letter of Authorisation and Indemnity” in favour of the Broker, in the form provided by the Broker.
- We understand that the signing of this acknowledgement is mandatory under the Code of Conduct for Persons Licensed by or Registered with the Securities and Futures Commission of Hong Kong. We understand that the Broker will not be able to effect our instructions to deal in securities/futures if this acknowledgement is not signed and dated by us.

Registered with the Securities and Futures Commission of Hong Kong. We understand that the Broker will not be able to effect our instructions to deal in securities/futures if this acknowledgement is not signed and dated by us.

- We have been informed that in case we open a Margin Account, the Broker may repledge our securities collateral.
- We hereby give Direct Marketing Authorisation, Standing Authority for Client Money and/or Standing Authority for Client Securities (as described in detail in the following paragraphs), if applicable to our Application.
- In the event of any difference in interpretation or meaning between the Chinese and English versions of these authorisations, we agree that the English version shall prevail.

Direct Marketing Authorisation (Applicable to all accounts)

We consent for the Broker and the Broker’s Group Company to use our personal data in direct marketing, unless we indicate disagreement by ticking [✓] in the following box:

☐ We do not consent for the Broker and the Broker’s Group Company to use our personal data in direct marketing.

The above represents our present choice whether or not to receive direct marketing contact or information. This replaces any choice communicated by us to the Broker prior to this Application. Our above choice applies to the direct marketing of the classes of products and services as set out in the Broker’s policy statement relating to the Personal Data (Privacy) Ordinance (Cap.486 of the Laws of Hong Kong), provided together with relevant Terms and Conditions. We should also refer to the policy statement on the kinds of personal data which may be used in direct marketing.

Automatic Exchange of Financial Account Information (Applicable to all accounts)

We acknowledge and agree that (1) the information contained in this form is collected and may be kept by the Broker for the purpose of automatic exchange of financial account information, and (2) such information and information regarding my account and any reportable account(s) may be reported by the Broker to the Inland Revenue Department of the Government of the Hong Kong Special Administrative Region and exchanged with the tax authorities of another jurisdiction or jurisdictions in which we may be resident for tax purposes, pursuant to the legal provisions for exchange of financial account information provided under the Inland Revenue Ordinance (Cap.112). We undertake to advise the Broker of any change in circumstances which affects my tax residency status or causes the information contained herein to become incorrect within 30 days of such change in circumstances.

Standing Authority for Client Money (Applicable to all accounts)

This authority covers money held or received in Hong Kong by the Broker and/or the Broker’s Group Company (including any interest derived from the holding of the money which does not belong to the Broker) in one or more segregated account(s) on our behalfs (“Monies”)

Unless otherwise defined, all the terms used in this authority shall have the same meanings as in the Securities and Futures Ordinance (Cap 571 of the Laws of Hong Kong) (the “Securities and Futures Ordinance”) and the Securities and Futures (Client Money) Rules (Cap 571I of the Laws of Hong Kong) as amended from time to time.

This instruction authorises the Broker to do any of the following without giving us notice:

- combine or consolidate any or all segregated accounts of ours, of any nature whatsoever, maintained by the Broker or the Broker’s Group Company (as defined in the Terms and Conditions) and the Broker may set-off or transfer any sum of Monies to and between such segregated account(s) to satisfy our obligations or liabilities to any member of the Broker’s Group Company, whether such obligations and liabilities are actual, contingent, primary or collateral, secured or unsecured;

2. transfer any sum of Monies to any futures trading/clearing/settlement account(s) maintained by the Broker with its agent broker(s) and/or clearing agent(s) for purpose of dealing in global futures transactions for and on behalf of us, if we maintain futures trading account(s) with the Broker; or
3. transfer any sum of Monies interchangeably between any of the segregated accounts maintained at any time by any member of the Broker's Group Company.

We hereby agree to indemnify and to keep indemnified, the Broker, its agent broker(s) and/or clearing agent(s) from and against all losses, damages, interests, costs, expenses, actions, demands, claims or proceedings of whatsoever nature which they (or any of them) may incur, suffer and/or sustain as a consequence of any transaction undertaken in pursuance of this authority.

This authority is given to the Broker in consideration of its agreeing to continue to maintain one or more trading account(s) at our choice with this Account Opening Form.

This authority is given without prejudice to other authorities or rights which the Broker or the Broker's Group Company may have in relation to dealing in Monies in the segregated accounts.

This authority shall be valid for a period of twelve (12) months from the date of this authority, unless otherwise terminated by the Broker or revoked by us with notice in writing to the Broker. This authority may be revoked by us by giving the Broker written notice addressed to the Broker's Documentation Control Department. Such notice shall take effect seven (7) Business Days after the date of the Broker's actual receipt of such notice unless otherwise determined by the Broker.

We understand that this authority shall be deemed to be renewed on a continuing basis for a further period of not more than twelve (12) months without our written consent if the Broker issues us a written reminder at least fourteen (14) days prior to the expiry date of this authority, and we do not object to such deemed renewal before such expiry date.

We acknowledge that our assets (including Monies) received or held by the licensed or registered person outside Hong Kong are subject to the applicable laws and regulations of the relevant overseas jurisdiction which may be different from the Securities and Futures Ordinance and the rules made thereunder. Consequently, such client assets may not enjoy the same protection as that conferred on client assets received or held in Hong Kong.

We confirm that this authority has been clearly explained to us. We understand fully the contents of this authority and we have sought, or have had the opportunity to seek, legal advice concerning its contents and effects.

Standing Authority for Client Securities (Applicable to Margin Account Only)

1. We confirm that we fully understand the contents of this authority and we further confirm our authorisation to the Broker to deal with the securities in the Margin Account opened or to be opened with the Broker to the extent permissible under the applicable laws, rules and regulations, including but not limited to the following:
 - (a) dispose of any securities collateral in settlement of (i) our obligation to maintain the agreed level of margin; and (ii) any other liability of us to the Broker;
 - (b) deposit the securities collateral in the Margin Account with an authorised institution (as defined in the Banking Ordinance (Cap 155 of the Laws of Hong Kong)) as collateral for financial accommodation provided by that authorised institution to the Broker;
 - (c) deposit the securities collateral with a recognised clearing house (as defined in the Securities and Futures Ordinance) or an intermediary licensed or registered for dealing in securities as collateral for the discharge and satisfaction of the Broker's settlement obligations and liabilities;
 - (d) apply the securities or securities collateral pursuant to a securities borrowing and lending agreement; or
 - (e) apply or deposit any of the securities collateral in accordance with Clause 1(a), 1(b), 1(c) and/or 1(d) above if the Broker provides financial accommodation to us in the course of dealing in securities and also provides financial accommodation to us in the course of any other regulated activity for which the Broker is licensed or registered.
2. We confirm that we fully understand the contents of this authority and the authorisation for the matters described in sub-paragraph 1(a) shall be effective for an indefinite duration and the authorisations for the acts described in sub-paragraphs 1(b), 1(c), 1(d) and 1(e) shall be valid from the date of this authority for a period of twelve (12) months. The Broker will send to us a reminder at least fourteen (14) days prior to the expiry of this authority. We understand that if no objection is received by the Broker before the expiry date of the then existing authority, the authority is deemed to be renewed (without our written consent) for another twelve (12) months from the date of expiry. At any point in time, the authority may be revoked and the revocation will be effective seven (7) Business Days after the Broker's actual receipt of the original written revocation bearing our signatures.
3. We understand that if the Broker lends or deposits any securities in the Margin Account to a third party, the return of such securities may be subject to the Broker discharging its obligations to such third party.
4. We confirm that the Broker may refuse to draw on the facility granted to us to settle any transaction if we do not give any authorisation required under any applicable laws, rules or regulations. We confirm that the above authorisations are transferable by the Broker or the Broker's assigns.
5. We also confirm that, unless otherwise disclosed to the Broker in writing:-
 - (a) none of our spouses is a margin account client of the Broker; and
 - (b) we do not control (either alone or together with our spouses) 35% or more of the voting rights of another corporate margin account client of the Broker.

SIGNED BY APPLICANT AND WITNESS

Signature of First Joint Applicant*

Name: _____

Signature of Second Joint Applicant*

Name: _____

* This signature will be used as specimen signature.

I, the undersigned, have witnessed the signature and verified the original identity documents of the Applicants.

Signature of witness

Name of witness: _____ Capacity of witness: _____ Date: _____

* Witness must be either a Licensed Person of SWHYS/SWHYF/regulated financial institution under the Broker's Group, Justice of the Peace, Certified Public Accountant, Lawyer, Notary Public or Chartered Secretary. Please provide proof of eligibility.

DECLARATION BY A LICENSED PERSON

I, _____ (BLOCK LETTERS) (CE No.: _____), hereby declare that the Broker has provided the Applicant with the Risk Disclosure Statements and Disclaimers in a language chosen by the Applicant (English or Chinese). I further declare that I have invited the Applicant to read the Risk Disclosure Statements and Disclaimers thoroughly, ask questions and take independent advice if the Applicant wishes.

Signature of licensed person

Date