



Guyana Americas Merchant Bank Inc.
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Guyana Americas Merchant Bank Inc.
Subsidiary of Secure International Finance Co. Inc.

**Member of Guyana Association of Securities
 Companies & Intermediaries Inc. (GASCI)**

NEW ACCOUNT APPLICATION FORM INSTITUTIONAL CUSTOMER

A/C NO	
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(NOTE ALL INFORMATION SHOULD BE COMPLETED)

A. ACCOUNT INFORMATION

LEGAL NAME (IN FULL)	TRADE NAME		DOI (dd/mm/yyyy)	REGISTRATION NO
REGISTERED ADDRESS	CITY/TOWN/STATE	COUNTRY/POSTAL CODE	MAILING INSTRUCTIONS <input type="checkbox"/> Hold <input type="checkbox"/> Business <input type="checkbox"/> PO BOX	
MAILING ADDRESS (If PO BOX, client's business address must be also be provided)	EMAIL ADDRESS	TELEPHONE	FAX	
ATTENTION / CONTACT	NATURE OF THE BUSINESS	ORGANISATION TPYE		
		Trust Company	Sole Proprietor	
		Partnership	Corporation	
		Professional Association	Non-Profit Organisation	
		Investment Club	Limited Liability	
		Governmental Org.	Other (Specify)	

INDUSTRY / SECTORS /SERVICES

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Automotive/Aviation | <input type="checkbox"/> Education & Training | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Property Dev. /Real estate |
| <input type="checkbox"/> Banking/Invest//Financial/Ins. | <input type="checkbox"/> Energy & Energy Related Services | <input type="checkbox"/> Media, Publishing and Print | <input type="checkbox"/> Telecommunication / I T |
| <input type="checkbox"/> Distributive Trade | <input type="checkbox"/> Facilities Management | <input type="checkbox"/> Mining and Quarrying | <input type="checkbox"/> Travel / Hotel & Tourism |
| <input type="checkbox"/> Construction/Engineering | <input type="checkbox"/> Health/Safety | <input type="checkbox"/> Professional Svcs/Private Sector Assoc. | <input type="checkbox"/> Shipping |

B. INVESTMENT PROFILE

INVESTMENT EXPERIENCE	INVESTMENT OBJECTIVE	RISK TOLERANCE	TENOR	ANNUAL INCOME <small>(From all sources)</small>
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- | | | | | |
|----------------------------------|---|---------------------------------|--------------------------------------|--|
| <input type="checkbox"/> NONE | <input type="checkbox"/> CAPITAL PRESERVATION | <input type="checkbox"/> LOW | <input type="checkbox"/> SHORT TERM | <input type="checkbox"/> Under \$1,000,000 |
| <input type="checkbox"/> LIMITED | <input type="checkbox"/> CAPITAL APPRECIATION | <input type="checkbox"/> MEDIUM | <input type="checkbox"/> MEDIUM TERM | <input type="checkbox"/> \$1,000,000 - \$1,500,000 |
| <input type="checkbox"/> GOOD | <input type="checkbox"/> INCOME | <input type="checkbox"/> HIGH | <input type="checkbox"/> LONG TERM | <input type="checkbox"/> Over \$1,500,000 |

WHAT IS YOUR NET WORTH? _____

C. BANK REFERENCE (S)

	NAME	POSITION	BANK AND ADDRESS
1			
2			

D. OTHER REFERENCE (S)

CSR(s) ANOTHER GAMBBI CLIENT _____
 OTHER (specify) _____

E. DECLARATIONS

1. SOURCE OF FUNDS

HOW MUCH WILL PASS THROUGH THIS ACCOUNT GS _____

HOW OFTEN WILL INVESTMENTS BE MADE MONTHLY QUARTERLY OTHER (SPECIFY) _____

I/WE DECLARE THAT THE Source of Funds for this transaction is _____

As a matter of policy, Guyana Americas Merchant Bank Inc. verifies the source of funds before accepting funds for settlement on the purchase of any securities or bonds on both local and foreign markets and for any other transaction. Consent is hereby given to Guyana Americas Merchant Bank Inc. to disclose the information provided herein to Regulatory and Law Enforcement Authorities. I/We declare that the information given is true and correct and that the money in this transaction comes from a legal source, and that the account is not to be operated for the purpose of laundering money, funding terrorists or any such illegitimate activities. I/We understand that under the Anti Money Laundering and Countering the Financing of Terrorism Act 2009, Guyana Americas Merchant Bank Inc. has an obligation to report any suspicious transactions.

2. OTHER TERMS AND CONDITIONS

In the case of Individual Client Applications, I/We certify to Guyana Americas Merchant Bank Inc. that the person(s) indicated in Section B. of this form is/are either 18 years or older.

In cases where mail is to be forwarded to my/our P.O Box or in care of a third party, I/We agree that "all correspondence(s) of any nature whatsoever sent to me/us in such address will have the same force and effect as if it had been delivered to me/us personally. I/ We have listed my/our permanent address on the application form.

I/We certify that the signatures in the section labeled "Signatories" are authentic and that the person(s) indicated as having trading authorization, and are authorized to give instructions for the operation of the account.

I/We certify that all information provided is true and correct. I/We understand that this information can be used by Guyana Americas Merchant Bank Inc. to verify the identity of the individual(s) / entities, therefore any changes made to Customer Information should be immediately communicated to this company in writing.

Guyana Americas Merchant Bank Inc. reserves the right to reject any application or to close any account, in particular those suspected of any illegitimate activities that are counter to the values of this company and the rules and regulations governing our business.

I/We agree that all transactions executed on behalf of me/us are subject to the rules and regulations of the Guyana Stock Exchange and in keeping with the Securities Industry Act, 1998 and its by-laws.

Guyana Americas Merchant Bank Inc. may communicate to the applicant the reason(s) for the rejection of any application or the closure of any account.

CLIENT OBLIGATION IN PURCHASE BARGAIN

Where a client in a purchase bargain fails to settle within the stipulated T+5 settlement cycle, Guyana Americas Merchant Bank Inc. shall sell out as soon as is reasonably possible in order to make good its position. The client will be responsible for costs and any further loss incurred after selling out. Defaulting client will also be reported to the Guyana Stock Exchange.

This condition will also apply in the event of death of a purchaser between the time of placing the order and settlement day except that Executors (or Administrators) of deceased purchaser will be responsible for the costs and any loss incurred after selling out.

I/We the undersigned have read and understand all Terms and Conditions stated in this Section Other Terms & Conditions' and attached Guyana Americas Merchant Bank Inc. Client Application Form.

F.LIST OF DIRECTORS / SIGNING AUTHORITY (IES)

No.	Name	Residential Address	Position (Director, Authorised Signatory etc.)	Whether Politically Exposed	Specimen Signature

* **PEP:** Politically Exposed Person

***RPEP:** Related to Politically Exposed Persons

Signing Limits (Please provide detailed information on signing limits)

Any two can sign All to sign

Other (specify)

G.SIGNATURES

	SIGNATURE	DATE	WITNESS TO SIGNATURE	DATE
DIRECTOR	▶			
DIRECTOR	▶			
CORP. SEC.	▶			

(Please Affix Stamp or Seal if any)

(Please Affix Stamp or Seal if any)

INSTRUCTIONS / KYC CHECK LIST

A. Important Points

1. Applicants are required to complete one (1) Non-Individual Application. All fields must be completed.
2. Source of Funds / Wealth for the account must be declared by applicant(s). Supporting evidence must be provided (financial statements, etc.)
3. Copies of all documents submitted by the applicant(s) and signatures must be certified /witnessed by entities authorized for certifying / notarizing documents, as per list below.
4. If any proof of identity or address is in a foreign language then English translation is required.
5. Applicants must provide two (2) forms of Government issued IDs for each Director / Authorized Signatory (ies).
6. Name and address of applicant on the KYC form should be the same as the documentary proof.
7. If mailing address and permanent address are different, then proofs for both must be submitted. If mailing address is a P.O. Box, then permanent address and proof must be submitted.
8. Sole proprietor or self-employed persons must complete the application in his individual name and capacity. He/she must declare his line of business; provide at least three years financial / bank statements and all relevant supporting company documents.
9. For non-resident Directors /Authorized Signatory (ies) and foreign nationals two notarized copies of IDs (inclusive of a passport) and proof of address must be submitted.
10. Politically Exposed Persons are defined as individuals who are or have been entrusted with prominent public functions, e.g., Heads of States or of Governments, senior politicians, senior Government/ judicial/military officers. Senior executives of state owned corporations (political appointees), important political party officials, financiers, etc

B. Proof of Identity for Director / Signatory: Any two of the listed identification documents. All Identification documents must be valid on the date of

1. Passport
2. National Identification card
3. If applicant(s) has/have only one (1) form of Identification, then a Birth Certificate or similar document must be submitted (affidavit of identity)

C. Proof of Address for Director / Signatory: List of documents admissible as proof of address:

1. Utility bills
2. Statements from other regulated financial institutions.

D. Other requirements for Director / Signatory

1. Character Reference
2. Bank Reference for Directors/ Signatories residing overseas

E. List of people authorized to certify documents:

1. Corporate Secretary / Director / Authorized Signatory (Notice of Change of Secretary / Directors must be provided).
2. Guyana Americas Merchant Bank Inc. Agents
3. Notary Public
4. Commissioner of Affidavits
5. Authorized official of the applicants bank (Name, Designation & Seal should be affixed on the copy)
6. Magistrate / Judge
7. Senior police /military officer (Name, Rank and Seal should be attached)
8. Guyana Embassy/Consulate General in the country where the applicants resides.

F. Additional documents to be obtained from Non-Individuals

TYPE OF ENTITY	DOCUMENTARY REQUIREMENTS
Corporate	<ul style="list-style-type: none">• Copy of Audited Financial Statements for the last 3 financial years (to be submitted)• Current Annual Return submitted to Company's Registrar establishing shareholdings, i.e., whether there is/are shareholders owning 5% of the company paid up share capital• List of Directors/Authorized signatories with specimen signatures• Board Resolution for investment in securities market• Articles of Incorporation• Certificate of Incorporation• Notice of Address of Registered Office• Notice of Secretary• Notice of Directors• Consent to act as Secretary• Consent to act as Director• Notice of Change of Directors / Secretary (if applicable)• Copy of Articles of Continuance (applicable, only if Companies incorporated before April 1997)• Copy of Certificate of Continuance (applicable only if Companies incorporated before April 1997)• Declaration of Compliance for purposes of Incorporation of a Company (applicable to Companies incorporated after April 1997)• By-Laws (applicable to Companies incorporated after April 1997)
Partnership	<ul style="list-style-type: none">• Copy of financials for the last 3 financial years• Copy of certificate of registration• Copy of partnership deed / agreement• List of Authorized Signatories list with specimen signatures• Copies of two forms of Government issued IDs of all Partner / Authorized Signatory (ies)
Trust	<ul style="list-style-type: none">• Copy of Audited Financial Statements for the last 3 financial years (to be submitted)• Copy of certificate of registration (for registered trust only)• Copy of Trust Deed• Copy of Resolution for investment in securities• Copies of two forms of Government issued IDs of all Trustees/ Authorized Signatory(ies)• List of Trustees / Signatories• Identity of beneficial Owner(s)
Credit Unions/ Registered Society	<ul style="list-style-type: none">• Audited Financials for the last 3 years• Copy of registration certificate under Societies Registration Act• List of Managing Committee / Board / Authorized Signatories with specimen signatures• Copy of By Laws• Copy of Board/Committee Resolution for investment

- Copies of two forms of Government issued IDs of all Directors/ Authorized Signatory (ies)

Investment Clubs/
Unincorporated Associations
or a body of individuals
Non Profit Organizations
(Registered)

- Proof of Existence / Constitution
- At least 3 years of Committee payments and expenditure
- Resolution of the Managing body & Power of Attorney granted to transact business on its behalf.
- Copy of Audited Financial Statements for the last 3 financial years (to be submitted)
- Current Annual Return submitted to Company's Registrar
- Copies of two forms of Government issued IDs of all Directors/ Authorized Signatory(ies)
- Copy of Resolution for investment in securities
- List of Directors/Authorized signatories with specimen signatures
- Copy of Board Resolution for investment in securities market
- Copy of Articles of Incorporation
- Copy of Certificate of Incorporation
- Copy of Notice of Address of Registered Office
- Copy of Notice of Change of Directors
- Copy of Articles of Continuance (applicable, only if Companies incorporated before April 1997)
- Copy of Certificate of Continuance (applicable only if Companies incorporated before April 1997)
- Copy of Notice of Change of Secretary
- Statutory Declaration of Compliance for purposes of Incorporation of a Company (applicable to Companies incorporated after April 1997)
- Copy of By-Laws (applicable to Companies incorporated after April 1997)

FOR OFFICIAL USE ONLY

ANTI MONEY LAUNDERING ASSESSMENT

1. Has the applicant name been checked against the list of known and suspected terrorist or blocked person and entities? If a match was found, was a Suspicious Activity Report completed and submitted to the AML Compliance Officer?	MATCH	<input type="checkbox"/>	NO MATCH	<input type="checkbox"/>
	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
2. Is the applicant a Politically Exposed Person (PEP) i.e. a holder or former holder of public office or related to or closely associated with such a person?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
3. Is the applicant engaged in any of the following businesses?				
Internet Gambling	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Real Estate	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Motor Vehicle Sales	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Gaming Houses	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Pool Betting	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
National Lottery Online Betting Games	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Charitable Organization	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Cash Intensive Business	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Jewellers	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Professional Service Providers e.g. Lawyers, Accountant, Doctors	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
4. Two (2) forms of ID received?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
5. Proof of Address	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
6. Has / Have the applicant (s) provided supporting evidence?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
7. Was/Were the applicant(s) information verified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
8. Was the Source of Funds declared?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

CUSTOMERS RELATIONS OFFICER CONFIRMATION ON CUSTOMER DUE DILLIGENCE

I confirm that I have complied with Guyana Americas Merchant Bank Inc. Anti-Money Laundering and Anti-Terrorist Financing Policies and Procedures.

_____ **Officer's Signature** _____ **Date** _____

APPROVAL OF ACCOUNT

ACCOUNT CREATED BY: _____ DATE: _____ SIGNATURE: _____

APPROVED BY: _____ DATE: _____ SIGNATURE: _____