



# Cantor Fitzgerald Ireland Ltd ("Cantor") Personal Structured Product Account Opening Form

## INTERMEDIARY CLIENTS

### Structured Product is defined as:

1. Corporate Finance Products (Private Equity Incl EIS/Private Loan Notes/Property Investments); or
2. Investment Bonds (Full capital protection at maturity, Partial capital protection at maturity, Kick Out Products and other equivalent Notes or Bonds).
3. Collective Investments: Schemes to invest in 1 & 2 such as QAIFs, Trusts or Special Purpose Vehicles.

### ACCOUNT SET UP CHECKLIST:

- I/We have completed the attached application form as required and have signed and dated.  
All documentation required below is attached: (for joint applicants we require documents per person)
- I/We have attached certified copy ID (Passport/Drivers Licence) by Garda, Solicitor or Cantor member of staff - please ensure it is in date.
- I/We have attached two certified bills or two originals of the bills listed below issued in the last 6 months and with the same address as noted on the application.
  - Gas, electricity, phone or motor insurance certificate/home insurance certificate/tax certificate
  - Bank statement from any Irish Bank
  - Social insurance document or Revenue Commissioners document

Please choose one of the below payment methods:

- I/We have enclosed cheque made payable to "Cantor Fitzgerald Ireland Ltd"
- I/We have enclosed bank draft made payable to "Cantor Fitzgerald Ireland Ltd" together with supporting documentation evidencing origin of funds e.g. copy of bank statement.
- I/We are investing from funds already in my/our Cantor Account
- I/We are investing this amount by Electronic Funds Transfer

### Payment Details

Please use the Ulster Bank details below for any Electronic Fund Transfers to your account in Cantor Fitzgerald Ireland Ltd. Please do not transfer funds until your Cantor Fitzgerald Ireland Ltd. account is open as you will need an account number as a reference.

#### Euro Bank Details

**Bank Name:** Ulster Bank  
**Account Name:** Pershing Securities International Limited Client Asset Account - Hub Account  
**Sort Code:** 98-50-10  
**Account No:** 31911845  
**SWIFT Code:** ULSBIE2D  
**IBAN:** IE72ULSB98501031911845  
**Reference:** Client Name & A/c Number. (All transfers must include client name and Cantor A/c number as a reference).

### Post/Delivery

Return the completed application and identification to:

DUBLIN: Cantor Fitzgerald Ireland Ltd, 75 St Stephen's Green, Dublin 2  
LIMERICK: Cantor Fitzgerald Ireland Ltd, Theatre Court, Lower Mallow Street, Limerick  
CORK: Cantor Fitzgerald Ireland Ltd, 45 South Mall, Cork

# Personal Investor Structured Product & Account Opening Form INTERMEDIARY CLIENTS



Intermediary Cantor Fitzgerald Account Number	<input type="text" value="DS"/>
Intermediary Firm	<input type="text"/>
Client Cantor Fitzgerald Account Number	<input type="text" value="DS"/>

**Option 1: Where you are a NEW client, please complete all sections.**

**Option 2: Where you are an EXISTING client, please include your account number and complete sections 4, 6, 7 & 8.**

## Section 1 - Beneficial Owner(s) (to be completed by all new applicants or where your details are being updated)

APPLICANT	JOINT APPLICANT (If applicable)
Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="text"/>	Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="text"/>
Surname <input type="text"/>	Surname <input type="text"/>
Forename(s) <input type="text"/>	Forename(s) <input type="text"/>
PPS Number <input type="text"/>	PPS Number <input type="text"/>
Date of Birth <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YY"/>	Date of Birth <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YY"/>
Country of Residence <input type="text"/>	Country of Residence <input type="text"/>
Nationality <input type="text"/>	Nationality <input type="text"/>

## Section 2 - Contact Details (to be completed by all new applicants or where your details are being updated)

APPLICANT	JOINT APPLICANT (If applicable)
Home Address <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Home Address <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Telephone Numbers and Email Address: Home No. <input type="text"/> Mobile No. <input type="text"/> Office No. <input type="text"/> Email <input type="text"/>	Telephone Numbers and Email Address: Home No. <input type="text"/> Mobile No. <input type="text"/> Office No. <input type="text"/> Email <input type="text"/>
<small>For correspondence purposes, Cantor May use the email address of the first party.</small>	
<b>Online Access</b> Would you like "view only" online access to your Cantor Account? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span> <i>This will allow you to view your account statement and valuation online.</i>	

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## Section 2 - Contact Details CONTINUED

### Online access for a third party

We will provide the third party with an online password to view the account should you select this option.

Would you like to give a third party, e.g. a Financial Advisor, access to the portfolio information online/by phone? Yes  No

If 'YES' please complete the section on next page:

Forename:  Surname:

Business Name:

Address:

Telephone

Email

*Please note, access will be granted at account set up and will continue until Cantor Fitzgerald is advised by account holder to remove permanently.*

## Section 3 - Bank Details (to be completed by all new applicants or where your details are being updated)

Bank Name

Bank Address

Account Name

IBAN\*  BIC

\*Your IBAN includes your account number and sort code and is an international standard for identifying bank accounts across national borders. This is detailed on your bank statement.

## Section 4 - Source of Wealth/Funds (to be completed by all investors)

**(i) Please indicate how your overall wealth was accumulated.** You can indicate more than one option.

- Savings
- Inheritance
- Equity/Fund Investment
- Property Investment
- Sale of Business
- Retirement Fund
- Redundancy
- Other: If other please specify:

**(ii) Please indicate the source of your initial transfer to Cantor.** You can indicate more than one option.

- Bank Deposit Account
- Transfer from other Investment Provider
- Bank Current Account
- Retirement Fund
- Other: If other please specify:

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## Section 5 - Assessment of Appropriateness, Knowledge and Experience (to be completed by all new applicants or where your details are being updated)

- Basic:** Have some knowledge but limited trading history.  
**Good:** Have knowledge and have traded over a number of years.  
**Extensive:** Have knowledge and have traded consistently over the past 5 years.

**Where you have dealt previously, has this service been primarily?** (If no previous experience please tick same)

- Execution Only (no broker input)       Advisory (broker advises, you decide)  
 Discretionary/managed (broker agrees investment parameters and has discretion to transact)  
 No previous experience

### Financial Instruments ALL SECTIONS MUST BE COMPLETED

**(i) Please indicate your investment experience in relation to the following instruments:**

	NONE	BASIC	GOOD	EXTENSIVE	NUMBER OF YEARS EXPERIENCE	AVG. NUMBER OF TRADES PER ANNUM
Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Corporate Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Government Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Investment Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Investment Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Corporate Finance Products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

### Relevant Professional Qualification or Experience

**Do you have professional qualifications or experience?** (for either client if joint)      Yes       No

- Do you have a professional qualification?      Yes       No
- Do you work as an investment manager/advisor?      Yes       No
- Are you a member of a recognised association?      Yes       No
- Other (please specify)

## Section 6 - Acknowledgement (to be completed by all new applicants)

In signing this document it will constitute a contract, both legally binding and enforceable. If you have any queries about any aspect of the account opening documentation please contact Cantor for clarification or, if you think it appropriate to do so, obtain independent legal advice.

The undersigned hereby acknowledges that:

- (a) I/We have carefully read, acknowledge and understand the terms of the below listed documentation which I/we have been presented with and have had an opportunity to consider. I/We hereby agree that by signing this acknowledgment that I/we will be bound by all terms and conditions contained in the following documents:
1. The Brochure or Information Memorandum pertaining to the Structured Product
  2. This Structured Product Application Form and Commitment Agreement (if required)
  3. Execution Only Terms and Conditions booklet:
    - I. Terms and Conditions of Service
    - II. Conflicts of Interest Policy
    - III. Order Execution Policy
    - IV. Information on Financial Instruments
  - (b) The service description set out in the Terms and Conditions booklet incorporates the service to be provided by Cantor to me/us in its entirety, and for which I/we now hereby apply.
  - (c) The details and information provided in this Account Opening Document is a complete and accurate record of all information relevant and necessary to allow Cantor to provide and Execution Only service to me/us.
  - (d) I/We acknowledge that Cantor will arrange for a nominee account to be opened with Pershing Securities International Limited on my/our behalf.
  - (e) I/we have been presented with and have had an opportunity to consider the **Client Asset Key Information Document** and I/We have carefully read, acknowledge and understand the arrangements Cantor have put in place for holding client assets and the risks associated with them.
  - (f) I/We are aware that any further investments or trading may be subject to further charges detailed on our current Rate Card. I/We are aware that any changes to this will be updated to the Cantor Fitzgerald website for my/our reference.

### Client Acceptance

#### APPLICANT SIGNATURE

Print Name

Date Signed

#### JOINT APPLICANT SIGNATURE (if applicable)

Print Name

Date Signed

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## Section 7 - Individual (Controlling Person's) Self-Certification for FATCA and CRS (PLEASE USE BLOCK CAPITALS)

Please note that where there are joint or multiple account holders each investor is required to complete a separate Self-Certification form.

### FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes:

**APPLICANT:** Are you a US citizen or resident in the US for tax purposes? Yes  No

**JOINT APPLICANT** (if applicable): Are you a US citizen or resident in the US for tax purposes? Yes  No

By opening this account and signing below, the beneficial owners(s) represents and warrants that he/she/it is not a US person for the purposes of US Federal income tax and that he/she/it is not acting for, or on behalf of, a US person. A false statement or misrepresentation of tax status by a US person could lead to penalties under US law. If your tax status changes or you become a US citizen or resident, you must notify us within 30 days.

### CRS Declaration of Tax Residency (please note you may choose more than one country):

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated taxpayer identification numbers ("TIN")). Please see the CRS Portal for more information on Tax Residency. NOTE: Provision of a Tax ID number (TIN) is required unless you are tax resident in a Jurisdiction that does not issue a TIN.

#### APPLICANT

Country Of Tax Residency	Tax ID Number (e.g. PPS)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

#### JOINT APPLICANT (if applicable)

Country Of Tax Residency	Tax ID Number (e.g. PPS)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

### Declaration and Undertakings:

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. I acknowledge that the information contained in this form and information regarding the beneficial owners(s) may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the beneficial owners(s) may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information. I undertake to advise the recipient promptly and provide an updated Self-Certification form where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

#### APPLICANT SIGNATURE

Print Name

Date Signed

#### JOINT APPLICANT SIGNATURE (if applicable)

Print Name

Date Signed

### Instructions for completion

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections above as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

If you have any questions about this form or defining the investor's tax residency status, please refer to the OECD CRS Portal or speak to a tax adviser.

For further information on FATCA or CRS please refer to Irish Revenue website at <http://www.revenue.ie/en/business/aeoi/index.html> or the following link to the OECD CRS Information Portal at:

<http://www.oecd.org/tax/automatic-exchange/in> the case of CRS only.

**If any of the information above changes, regarding the beneficiaries tax residency or FATCA/CRS classification, please notify us of these changes immediately.**

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## 8. INVESTMENT DETAILS (to be completed by all investors) Please see bank details on the front cover

### A) Corporate Finance/Collective Investment

(Private Equity Incl EIS/Private Loan Notes/ Property Investments)

Amount to Invest

### B) Investment Bonds

Bond Option (if applicable)

Amount to Invest

(Full capital protection at maturity, Partial capital protection at maturity, Kick Out Products and other equivalent Notes or Bonds).

### INVESTMENT ADVISOR DECLARATION:

I/We confirm that I/We have provided financial advice to the client(s) above in relation to this product and have fully explained all of the potential risks involved, including the risk of total capital loss. I/We confirm the following:

- Having conducted a full review of this investor's financial circumstances, that this product is consistent with the investor's investment objectives and risk appetite.
- I/We can confirm that I/we have given due consideration to the target market assessment as outlined in the product brochure and manufacturer KID document and are satisfied that the investor falls within the positive target market.
- I/We have complied with legislative requirements as set out under Criminal Justice (Money Laundering and Terrorist Financing) Act 2010 & Criminal Justice Amendment Act 2013.
- Where an investor has been identified as potentially vulnerable (e.g. over 60 years of age), I/We have taken the necessary precautions to protect the investor in this regard.

Advisor Firm Name

Advisor Name (Print)

ADVISOR SIGNATURE:

Date:

### INVESTOR DECLARATION:

I/We declare that:

- the above details are correct
- I/we are over 18
- I/we understand and accept that the Terms and Conditions of the product(s) set out in the brochure/IM and commitment agreement are consistent with my/our risk profile and investment objectives
- I/We understand that the investment will not be deemed to have been made until the application has been accepted and that if accepted will commence on the issue date.

I/We hereby acknowledge, request and authorise you to:

- Place my/our capital investment in the product(s) issued by the issuer as detailed in the brochure(s).
- Where I/we are investing through an authorised intermediary of Cantor and do not already have an account with Cantor Fitzgerald Ireland, to open an execution only account for the purposes of administering my/our investment(s).
- Request further documentation if I/we wish to engage in trading or make other investments on this account as required.

By signing this application I am agreeing that Cantor Fitzgerald Ireland Ltd may use my/our information in the way described in this form and in the associated terms and conditions.

I/We declare that; I/We have received financial advice on this product.

I/We fully understand all of the potential risks involved in this product, including the risk of total capital loss

APPLICANT SIGNATURE

Print Name

Date Signed

JOINT APPLICANT SIGNATURE (if applicable)

Print Name

Date Signed