| Shi | ahjak | al Isla | mi Ba | ank S | ecurit | los | Ter. | শাহুজা | লাল ইসলামী | ব্যাংক সিকি | উরিটিজ |
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| SI | No.: [| | PAI | Hea 3X: 957 E-m | d Office 10 , Dii 7564, 95 ail: <u>info(</u> | , Jiban lkusha 58784 6 @shahj | Bima Bha C/A, Dha 5, 7118425 alalbanks | TREC No aban (4th I ka – 1000 5, Fax: +88 <u>ecurities.c</u> securities.c | Floor) 3 02 9585846 <u>om.bd</u> | Pł | noto |

Application form for: Internet Trading Service SMS Service

| Client Code | | ITS Code(DSE) | |
|-------------|----------|---------------|--|
| BO ID | 12040900 | ITS Code(CSE) | |

Personal Information of the Client:

| Client's Name | : | | | | | | |
|---|---|--|------|--|--|--------|---------------------|
| Nationality | : | | | | | | |
| Date of Birth | : | | | | | | |
| Contact: | | | | | | | |
| Mobile No. | : | | | | | | |
| Phone No. (If Any) | : | | | | | | |
| E-mail | : | | | | | | |
| Mailing Address | : | | | | | | |
| Account Type | : | | Cash | ı 🗆 | | Margin | |
| Exchange Name | : | | DSE | | | CSE | |
| INTRODUCER, AUTHORISED PERSON, BEI Name with address, of the authorized person of the client (if the client is an organization) Name & full address (with reference | | | | | | | erson of the client |
| no./particulars, if any) of the person introducing the client | | | | Signature of the person introducing the client | | | |
| Signature of the designated beneficiary (1 st A/C Holder) | | | | Signature of the designated beneficiary (2 nd A/C Holder) | | | |

Declaration:

I/we hereby declare that all information provided and the statements made in this Online Trading / SMS Service Account Form are true and correct and are not misleading. I/we am/are of legal age to contract. I/we acknowledge that I/we have received, read and agree to be bound by the terms and conditions as defined in my/our BO Account opening File and as amended from time to time. I/we shall maintain confidentiality of the password provided by the system and I/we shall be solely responsible for the consequences if my/our password is mishandled or any transaction happened due to such unauthorized disclosure or mishandling and in such case I/we have no claim to Shahjalal Islami Bank Securities Limited as well as if any such mishandled transaction happened through my/our account I/we shall be liable for the same and will be bound to pay the penalty imposed by Shahjalal Islami Bank Securities Limited and Regulatory Authority.

| Signature of the Client |
|------------------------------|
| (1 st A/C Holder) |

Signature of the Client (2nd A/C Holder) Date

| For TREC Holder's use only | | | | | | |
|--|--|--|--|--|--|--|
| I have received this application and believe the account is suitable for cash/ margin basis. | | | | | | |
| Approval By | Checked By | | | | | |
| Name of the Officials Signature Date | Name of the IT Officials Signature Date | | | | | |
| | Signatures of the CEO &Compliance Authority (with Seal of the Company) | | | | | |