

**BROKERAGE ACCOUNT OPENING APPLICATION FORM** 

Email completed form to accounts@scbmail.trade Website: www.scbrokerage.trade

# SUNCAST CAPITAL BROKERAGE (SCB)

"YOUR CHOICE FOR A BETTER OFFSHORE BROKERAGE PORTFOLIO"



## Account Opening Documentation:

We seek your understanding and cooperation in furnishing the documents required for account opening and value your time and effort in doing so. We request you to provide suitable documentation as indicated below which is required by the Bank under local laws and regulations and also to comply with KYC guidelines and policy as part of the global effort to combat money laundering, terrorist financing and fraudulent activity.

## **Important Note:**

- Please fill the form in CAPITAL letters and tick wherever applicable.
- · Avoid any sort of alterations/cutting in the Application form.
- · Produce original documents for verification against each self attested photocopy by Account Holder(s).
- Please produce separate documents to evidence proof of identity and proof of address for confirming name, date of birth and current residential address for each account holder.
- · Please avail of the nomination facility.
- Please attach separate sheets in case the given space is insufficient.

## **Account Opening Requirements:**

- 1. Completed Account Opening Application Form along with required documentation.
- 2. Recent Passport size photographs of all the Account Holder(s) duly signed on front (not more than six months old).
- 3. Current Bank Statement (whichever is applicable).

Documents to be submitted for Account Opening:										
Identification Proof (List A)	Address Proof (List B)									
<ul> <li>Passport</li> </ul>	<ul> <li>Passport</li> </ul>									
Driving License	<ul> <li>Voter ID Card</li> </ul>									
Voter ID Card	Driving License									

- Any Photo ID card issued by Central/State Govt./ Armed forces ID card
- Latest utility bill in the name of the applicant(s) i.e. electricity, water or telephone bill (not older than three months)
- Visa copy / Appointment letter (applicable in case of foreign nationals only)
- Letter from the Embassy confirming residential address (applicable for Diplomats and other Embassy officials)

#### **Special Instructions:**

In case of joint account holder(s), acceptable documents which can be submitted as proofs for establishing relationship-

- Passport
- Driving License
- Voter ID Card
- Photo-Ration Card

For ascertaining Minor's date of birth, acceptable documents which can be submitted-

- Birth certificate issued by State of Local Authority.
- Passport held in the name of the minor.

**Note:** 1. Bank may request for any further specific / additional documents as may be required.



	Account	Numbe	r	(For	Bank	use o	nly)					Cust	ome	r IP	) No.		
									Date			ЪЛ	Ъ.Л.				
(To be filled by applica			•									M	Μ	т •	T	T	T
Please fill the form in E Do not leave any field I									K DOXES	s who	ere a	ippli	cab	le.			
I/We hereby request SC	Brokeraç	ge			Brar	nch to o	open	my/ oı	ir accou	nt. D	enor	nina	ted (	Curr	ency	y of	
the Account		Н	KD		GBF		Eu	ro	USD								
Type of Account Resider	nt			RESI	DENT				FOREI	GNEF	२						
Details of Account - So	ole / Firs	st Applio	cant:														
1. Title	Mr.	M	rs.	Ms.		Other	s (ple	ease sp	pecify)_								
2. Full Name		Fi	r	s t			а	s t	M	i	d	d		е			
<ol> <li>Other common name former name if any</li> </ol>	s used /																
4. Reason for using oth	er name																
5. Date of Birth	D M N	/ Y Y	Y	Y	6. G	ender		Male		Fe	emale	e	T	hird	Ge	nder	
7. Nationality / Citizensł	nip																
8. Minor Account	Yes	;	No			9. S	enior	Citize	ר <u>ר</u>	Yes	6		No				
If yes, Name of Parent /	Guardia	n															
Relationship with minor	Fat	her	Мо	other	A	\s per	Cour	t Orde	r 🗌 Ot	hers							
11. Communication De	etails:																
Permanent / Residential Address																	
City																	
State																	
Pin Code / Zip Code				Co	ountry												
Tel: Residence																	
Correspondence / Mailing Address																	
City																	
State																	
Pin Code / Zip Code				Co	ountry												
Contact Details					-												
Mobile																	
Tel : Residence																	
Tel : Office												E>	۲n.				
Fax :																	
Email																	



12. Personsal Details:	
Educational Qualification Undergrad	duate Graduate Postgraduate
Others (PI	ease specify)
Marital Status Unmarried	Married Others (Please specify)
Number of Dependents Adults	Children
Annual Income (in USD)	
13. Occupation Details:	
Salaried Self-employed	Business Retired
Housewife Student	Others ( please specify )
In case of Salaried (Please provide Employe	er details, Designation, Job Profile and Nature of Work)
In case of Self-employed	
Chartered Accountant / CPA Docto	r Engineer
Lawyer / Notary	ultant / Professional Other (please specify)
Please mention briefly nature of professional	
In case of Business	
Manufacturing	Retailer / Stockist
Finance / Investment	Wholesaler
Export / Import	Commission Agent / Broker
Service Provider	Lottery
Trading	Arms and Ammunition
Antique Dealer	Dealer in precious metals / stones
Bar / Night Club / Casino	Money exchanger
Real Estate Agent	Others ( please specify )
Please mention briefly nature of business acti	ivities undertaken
Nature of Industry:	
Engineering / Architectural Firm	Food Products Power / Electricity
IT Software / Hardware	Gems / Jewellery Retailing
Commodities	Hotel / Restaurant Shipping
Construction / Real Estate	Chemicals Textile
Electronic Goods	
Financial Services	Metals Transport / Logistics
Others (Please specify)	

1. Title	Mr.		/Irs.	Ms		Othe	ers (p	leas	e sp	ecify	/)							
2. Full Name		F		r s	t							M	i	d	d		е	
								а	S	t								
3. Other commo																		
former name i	any																	
<ol> <li>former name i</li> <li>Reason for us</li> <li>Date of Birth</li> </ol>	-	·																
4. Reason for us	bing other name	MY	Y Y	Y		Gender		N	lale			Fe	male	9		Thirc	l Ge	nder
4. Reason for us 5. Date of Birth	bing other name	M Y `				Gender		N	lale			Fe	male	e [		Thirc	l Ge	nder
<ol> <li>Reason for us</li> <li>Date of Birth</li> <li>Nationality / C</li> </ol>	ing other name	M Y Y	No			Gender		N	lale			Fe	male	e [		۲hirc	l Ge	nder

Residential Address																				
City																				
State																				
Pin Code / Zip Code						Cc	untr	y												
Tel: Residence																				
Contact Details																				
Mobile																				
Tel : Residence																				
Tel : Office																	E	xtn.		
Fax :																				
Email																				
14. Details of Acc	ount H	lold	er(s)	:																
					 		K	inc	lly :	Sig	n i	n tł	ne	bo>	k þ	elo	w		 	
Paste your passport photo here																				

5 of 7



## Know Your Customer (KYC) Details:

	Document submitted for Proof of Identity / Address	Document Identification No. (If any)	Place of Issue	Date of Issue	Date of Expiry
First Applicant					
Second Applicant					
Third Applicant					
1. Purpose of Accou	unt Opening:		1		
Salary		Loar	Repayment		
Business		Basi	c Household Expense	S	
Investment		Othe	rs ( please specify ) $\_$		
2. Expected Source	of Funds:				
Salary Receipts		Rent	al Income		
Business Income		Inter	est / Dividend Income		
Income from Inves	tments	Inhe	ritance		
Consultation / Prof	essional Fees	Othe	ers ( please specify ) _		
Savings					
3. Expected Account	t Turnover (USD):	4. Expec	ted Number of Trans	actions per ye	ar:
5. Types of Account	::				
Brokerage Plus Acc 1. Reduced Taxation (5%) 2. High Interest Margin (8.5 3. No Limit on Deposit 4. No Limit on Withdrawal 5. Opening Deposit: \$5,000 High Yeild Interest De 1. Reduced Taxation (2.1% 2. High Interest Margin (15' 3. No Limit on Deposit 4. No Limit on Deposit 4. No Limit on Withdrawal 5. Opening Deposit \$10,00 All international cus You are required to We also support cr Local customers ar	USD (95% is credited to your count (Current & Savings bo 5%) 0.00 USD (95% is credited to b) 0.00 USD (95% is credited to NOTE: stomers are required to main o send a confirmation slip to yptocurrency payments successory	th can be opened on requ your account) ws Only Current ) your account) ke their opening deposit th us upon your payment to th as (Bitcoins, Etherrum a clearing bank.	nrough our licensed fiduc our agent. and USDT)	iary agent.	
Kindly contact our	account department for dep	osit instructions. account	s@scbmail.trade		
6. Whether existing	account holder				
Yes No	If yes, Customer ID		Account Number		
7. Whether Letter of	Authority/Power of A	torney given to anot	her person Y	es No	
If yes, please provide I	POA Holder's name		Date of Birth	D M M `	Y Y Y Y
Address		Id	entification document		

(for confirmation of name, date of birth and address)



## Foreign Exchange Management Act, 1999 (FEMA)

I/We hereby declare that the transactions relating to foreign exchange routed through your Bank do not involve, and are not designed for the purpose of any contravention or evasion of the provisions of the aforesaid Act or of any rule, regulation, direction, or order made here under. I/We also hereby agree and undertake to give such information/ documents as will reasonably satisfy you about the transactions in terms of the above declaration.

## Authority For Collection of Cheque/Drafts/Documents

I/We may have occasion from time-to-time to hand over to you for collection or negotiation Cheques, Drafts or Bills of Exchange (with or without documents attached) and I/we hereby agree to your forwarding the same to your agents for the time being for collection or negotiation. In the event of your having no independent collecting agent at any centre, I/ we hereby authorize you to send cheques, drafts, etc. by mail directly to the drawee bank itself.

I/We agree and undertake to hold you harmless, free from any responsibility and indemnified for any loss suffered by you in handling this business or transactions due to any cause whatsoever including delay in transit presentation, payment or default by your agent.

In addition to your ordinary rights as holder of such Cheques, Drafts or Bill of Exchange, you are authorized to accept in payment thereof a banker's cheque or banker's cheques payable at your station or at other places and in the event of such cheque(s) not being paid on presentation to debit the amount to our account with all charges incurred thereon. I/We confirm that you can present Bills and receive the amount in respect thereof in accordance with the usage of the place where the Bills are made payable. It is understood that these transactions are in all respects at my/our entire risk and responsibility.

## **Customer Declaration**

I/We hereby acknowledge that I/we have received, read and understood the Bank's prevailing Terms, Conditions and Rules Governing Deposit Account and Schedule of Fees and Charges relating to the above account being opened by me/ us.

I/We agree to abide by the same as amended from time-to-time and further agree to abide by any additional terms and conditions governing any facilities, products and/or services offered by the Bank as I/we may apply for and/or utilize from time to time.

I/We hereby confirm and declare that in relation to

any Transaction, Dealing(s), Credit including advise or confirmation of the same, the obligations of the Bank shall be subject to the condition that the terms thereof including any document or drafts do not contain state or mention, including without limitation:

- (i) Any countries, organizations, entities, or individuals (under any law) relating to any sanction parties listed under United Nation, European Union, United States of America, Japan, Hong Kong and other authorities;
- (ii) Any goods of origin from sanction countries listed under United Nation, European Union, United States of America, Japan, Hong Kong and other authorities;
- (iii) Any prohibited goods under the list of United Nation, European Union, United States of America, Japan, Hong Kong and other authorities;
- (iv) Any place or loading, place of discharge, or place of transhipment under the list of United Nation, European Union, United States of America, Japan, Hong Kong and other authorities; and/or
- (v) Any vessel or carrier relating to any sanction parties listed under United Nation, European Union, United States of America, Japan, Hong Kong and other authorities.

## *I/We shall maintain the minimum balance requirement as applicable at all times and the Bank shall levy prescribed charges in case of non-maintenance of minimum balance. In case of change of mailing address and other contact details, the same shall be communicated to the Bank in writing.*

It is understood that the above account will be opened on the basis of the statements, declarations made by me/us and I/We represent that the information provided by me/us in this application form and in any other document(s) provided by me/us to the Bank is true, accurate and complete.

I/We acknowledge that the Bank may decline my/our application without providing any reason in which event no contractual relationship will arise between the Bank and me/us.