

Annexure II

WE FINANCIAL SERVICES LTD.

506-508 5th Floor, PSX Building, Stock Exchange Road, Karachi — 74000, Pakistan KNOW YOUR CUSTOMER (KYC) APPLICATION FORM

(To be also used for Online Account Opening with AI) INDIVIDUAL

(Form to be filled preferably in BLOCK LETTERS)

A. IDENTITY DETAILS OF APPLICANT	,									
1. Full name of Applicant (As per CNIC/SNIC	/NICOP/ARC/POC/	Passport) Mr.	/ Mrs. / M	s.						
2. a. Father's / Husband's Name:	2.b Mother's I	Maiden Name								
3. a. Nationality:	3.b Marital status: Single Married c. status: Resident Non-Resident									
d. Place of Birth:	e. Gender: M	ale F	emale							
4. a. CNIC/SNIC/NICOP/ARC/POC No:										
b. Expiry date:	c. Issue Date:									
5.Passport details:	Passport Number:				Place	e of Issue:				
(For a foreigner or a non-resident Pakistani)	Date of Issue: Date of Expiry									
6 . Date of Birth					'					
B. ADDRESS DETAILS OF APPLICANT										
1.(a) Mailing Address: (Address should be diff	ferent from authorized	l intermediary l	ousiness ac	ldress exce _l	ot for empl	oyees of au	horized inter	rmedi	ary)	
	City/Town/Village:		Province/State:			Cou	Country:			
(b) Tel. (Off.)*: (c)Tel. (Res)*:			(c) Mol	bile**:		(e) E	mail**:			
Specify the proof of address submitted for me	ailing address:									
2.(a) Permanent Address: City/Town/Village: (Mandatory if different from above or overseas	Province/State: address)		Country:							
(b) Tel. (Off.)*: (c)Tel. (Res)*:		(c) Mobile*			(e) E	(e) Email(If Any):				
Specify the proof of address submitted for pe	Specify the proof of address submitted for permanent address:									
C. OTHER DETAILS										
Gross Annual Income Details: (Please specify	· =	00,000 1 - Rs. 250,000		•	1 - Rs. 500, 1 - Rs. 1,00	=	Rs. 1,000 Above Rs		- Rs. 2,500,000 10,001	
2. Source of Income:										
3.(a) Occupation:	Agriculturist		Business		Hous	Housewife			Household	
[Please tick (V) the appropriate box]	Retired Person		Student		Business Executive			Industrialist		
(b) Name of Employer/Business:	Professional	Professional (a) Lab Title		/ Designation:		Govt. / Public Sector (d) Department:			Others (Specify)	
		(c) Job Tille /	Designal	1011:		(a) Deparin	ieiii:			
(d) Address of Employer/Business:										
D. BANK DETAILS / E-WALLET										
Bank Name/ E-Wallet Name:										
IBAN / E-Wallet No.										
Bank Name:			IBAN No.:							
E-Wallet Provider Name:			E-Wallet Number:							
E. DECLARATION										
I hereby confirm that all the information funchanges therein, immediately. In case any of held liable for it. I hereby, unconditionally and irrevocably, de an Annexure to this KYC Application Form du I hereby acknowledge that I was informed by prescribed under CKO Regulations, 2017 and with me by the Authorized Intermediary are	the above information clare, confirm and act ly provided to me by the Authorized Interdance are also available of	cknowledge had the Authorized mediary at the on the website of	ving read d Intermed e time of f of CKO, fu	or false or in full and diary at the iling this KY orther, I hav	understood time of fil 'C Applica' e no doubt	or misrepr d the releve ing of this K tion Form the or concern	esenting, I a nt terms and YC Applicat at these term that the term	m aw d cond tion Fo ms and ns and	ditions attached as orm. d conditions are	



KNOW YOUR CUSTOMER (KYC) APPLICATION FORM

Signature of the Applicant	Date:	(dd/mm/yyyy)	Signature of the Applicant as per CNIC/ SNIC/NICOP/ARC/POC/Passport (Only applicable if Applicant signature is different)
FOR OFFICE USE ONLY			
I hereby confirm and acknow Customer at the time of filing			and conditions attached as an Annexure to this KYC Application Form to the
CKO Regulations, 2017 and	on the website of CKC	D, I further confirm and ackno	C Application Form regarding the availability of these terms and conditions in owledge that I have no doubt or concern that the terms and conditions shared ith the terms and conditions specified in CKO Regulations, 2017 and available
Authorized Circumstance			Contiference of the Authorized International
Authorized Signatory		Date	e Seal/Stamp of the Authorized Intermediary

^{*} Optional

^{**} For NICOP/ARC/POC/Passport, Email is mandatory and Mobile Number is Optional. Whereas for CNIC/SNIC, Mobile Number is Mandatory and Email is Optional, however, in case of online account opening, both mobile number and email address are mandatory for resident individual Pakistani customers. In case of SNIC where country of stay is not Pakistan, email will be mandatory.

^{***} IBAN / E-Wallet Number shall be mandatory for all Customers except for those who have provided an undertaking for exclusion from IBAN requirement due to any exception available under applicable laws, rules, regulations etc. or where permitted by CKO for reasons to be recorded.



ANNEXURE - IIIA

TERMS AND CONDITIONS FORMING MANDATORY PART OF KYC APPLICATION FORM FOR INDIVIDUAL AND KYC APPLICATION FORM FOR CORPORATES AS PRESCRIBED UNDER ANNEXURE II AND ANNEXURE III OF THESE REGULATIONS

Terms & Conditions of the KYC Application Form:

- 1. All terms herein shall, unless expressly stated otherwise, have the same meaning as ascribed to them in the Centralized KYC Organization Regulations.
- 2. The information provided in KYC application form and/or CRF shall be in addition to and not in derogation of the requirements prescribed under Anti-Money Laundering and Countering Financing of Terrorism Regulations, 2020.
- 3. All correspondence shall be sent by CKO at the mailing address and/or email address of the Customer, as stated on the KYC Application Form. KYC application form shall be submitted electronically for Online Account Opening of Individual Pakistani Customer by Authorized Intermediary that is a Professional Clearing Member or a Securities Broker.
- 4. Neither the CKO nor its directors, officers, employees or agents shall be liable for losses, damages, liabilities, costs or expenses suffered or incurred by the Customer as a result of providing its KYC Information to Authorized Intermediaries or the CKO due to any reasons whatsoever including its unauthorized disclosure.
- 5. The Customer undertakes to indemnify the CKO against any losses, damages, liabilities, costs or expenses suffered or incurred by CKO, including any legal costs and claims by third parties, as a result of any inaccuracy, misrepresentation, misstatement or incorrect details in the information supplied by the Customer or any omission in such information or any other contravention or violation of the Centralized KYC Organization Regulations
- 6. The Customer agrees that in the event that he does not abide by the timelines prescribed in the Centralized KYC Organization Regulations for submission of information and confirmation to the NCCPL, the NCCPL shall be authorized to take action as prescribed in the Centralized KYC Organization Regulations. The Customer undertakes that it shall hold CKO harmless and that CKO shall not be liable for any losses, damages, liabilities, costs or expenses suffered or incurred by the Customer as a result of such actions.
- 7. The Customer agrees that CKO may hold, store and process its KYC Information on the KYC Information System and KYC Database in connection with its KYC functions under the Centralized KYC Organization Regulations. The Customer also agrees that CKO may disclose its KYC Information as permitted under the CKO Regulations and such other disclosures as may be reasonably necessary for compliance with any other laws or regulatory requirements.
- 8. The Customer acknowledges that KYC Information System and KYC Database, including but not limited to all the information contained therein is the legal property of CKO.
- 9. The Customer agrees that verification against KYC information provided by Customer and Authorized Intermediaries, shall be performed by CKO as per CKO Regulations and such verifications shall include verification of KYC information through linked services such as RAAST

1-Link, PMD. NADRA. etc.

- 10. The Customer agrees that KYC information provided by Customer at the time of onboarding shall be shared with CDC in pursuance of provisions prescribed by the Securities & Exchange Commission of Pakistan with respect to Central Gateway Portal managed by CDC.
- 11. The Authorized Intermediaries agree to pay CKO the fees and charges as prescribed by CKO from time to time in respect of its KYC functions.
- 12. CKO has absolute discretion to amend or supplement any of the terms and conditions at any time and will endeavor to give prior notice of fifteen days wherever feasible for such changes.
- 13. The Customer agrees and affirms that it shall be bound by and acts in accordance with the provisions of the Centralized K YC Organization Regulations.
- 14. These terms and conditions shall be governed by the laws of Pakistan.
- * The terms and conditions will be part of the Online Account Form for Individual Pakistani Customers.



KNOW YOUR CUSTOMER (KYC) APPLICATION FORM

Customer Type	KYC Supporting Documents for Customer
Individual	i. Copies of CNIC, SNIC, NICOP, ARC, POC and/or passport* where applicable.
	ii. Proof of mailing/permanent address*
	Note: In case the address provided is same as in CNIC, no additional document is mandatory. In
	other cases, any of the following documents shall be obtained:Utility bills; rental agreement;
	insurance policy.
	III. Employer Details (for salaried persons) *
	Copy of service card or any other acceptable evidence of service, such ascertificate from the employer.
	iV. Proof of business for self-employed persons*.
	*Not applicable for opening Sahulat Accounts for individuals who wish toundergo simplified KYC.
Body Corporate	 Certificate of incorporation and/or certified copies of constitutive documents. Certificate of commencement of business, if applicable.
	ii. Any license issued by a regulatory body in case of specialized companies.
	iii. List of directors as per latest form 29 filed with the Commission.
	iV. Copy of latest form A filed with the Commission.
	V. NTN Certificate of the Customer.
	VI. Copies of CNICs of all the directors.
	VII. Memorandum and Articles of Association.
	VIII. Board Resolution for opening the account and authorizing the relevant officialto operate the account along with copy of CNIC of such official.
	iX. Latest Audited Financial Statements, where applicable.
	X. Where the Customer is a non-resident or foreign company/entity, duly consularized copy of board
	resolution/power of attorney along with constitutivedocuments and list of directors attested by the
Partnership	consul general of Pakistan having jurisdiction over the Customer
1 armersnip	I. Copy of partnership deed.
	II. Copies of CNICs of all the partners.
	III. Attested copy of Registration Certificate with Registrar of Firms. In case thepartnership is unregistered, this fact should be clearly mentioned.
	IV. Latest Financial Statements.
	V. Authority letter, in original, in favor of the person authorized to operate on the account of the firm
	along with copy of CNIC of such person.
Trusts	i. Copy of constitutive documents.
	ii. Copies of CNICs of all the trustees.
	iii. Copy of resolution for opening the account and authorizing the relevant officialto operate the account along with copy of CNIC of such official.
	iV. Copy of NTN Certificate where applicable.
	V. Latest Audited Financial Statements, where applicable.
	Vi. Proof of Annual Income*.
	VII.Proof of Net-equity/net-assets if provided in KYC Application Form*. *Only applicable if financial statements are not available or provided.
Other Not-for- Profit	i. Copies of the constitutive documents, bylaws and certificate of registration.
Organizations	ii. Copies of CNICs of the members of the governing body.
	iii. Authority letter, in original, in favor of the person authorized to operate on theaccount of the organization along with copy of CNIC of such person.
	iV. Latest Audited Financial Statements, where applicable.
	V. Proof of Annual Income*.
	Vi. Proof of Net-equity/net-assets if provided in KYC Application Form*.
	*Only applicable if financial statements are not available or provided.