KNOW YOUR CUSTOMER (KYC FORM)/CUSTOMER DUE DILIGENCE (CDD) FORM SECTION 1: INDIVIDUAL CLIENTS

| PERSONAL INFORMATION | |
|---|--|
| MAIN APPLICANT | JOINT ACCOUNT HOLDER |
| Name: | Name: |
| CNIC No.: | CNIC No.: |
| Father/Husband's Name: | Father/Husband's Name: |
| Address: | Address: |
| | |
| Permanent Address: | Permanent Address: |
| Tel (Res.): Tel (Off.): | Tel (Res.): Tel (Off.): |
| Cell (#): Email: | Cell (#): Email: |
| Marital Status: Married Single | Marital Status: ☐ Married ☐ Single |
| Gender: | Gender: |
| Nationality: Pakistani Others (please specify): | Nationality: Pakistani Others (please specify): |
| Mother's Maiden Name: | Mother's Maiden Name: |
| Qualification: | Qualification: |
| Source of Fund: | |
| OCCUPATION DETAILS | |
| Name of Company: | Name of Company: |
| Designation: | Designation: |
| Nature of Business: | Nature of Business: |
| Salaried Businessmen Self Employed | Salaried Businessmen Self Employed |
| Monthly Income: | Monthly Income: |
| Expected Investment: | Expected Investment: |
| Client's Risk Profile: High Moderate Low | Client's Risk Profile: High Moderate Low |
| SECTION 2: INSTITUTIONAL CLIENTS | |
| Name of Institution: | |
| Institution Category: | |
| Registered Address: | |
| Date of Incorporation: | Date of Commencement: |
| Registration No. : | NTN No.: |
| SECTION 3: DECLARATION | |
| a. Has any Financial Institution ever refused to open your accoun | t (For both Individual & Institutional Clients)? |
| b. Do you hold a position in any political party/public office or hold a high profile position? | |
| c. Do you agree to submit source of wealth/funds to AHM on regular basis (only applicable to clients specified in b) above)? Yes \square No \square | |
| d. Do you have any transactions in/from offshore Tax Haven countries (for both Individual & Institutional Clients)? | |
| e. Do you deal in high value items i.e. Gold, Silver, Diamonds etc.? | |
| f. Are you opening an account with AHM on behalf of any other person (third party account with AHM cannot be opened)? Yes \Box No \Box | |
| g. Do you belong to countries where Anti Money Laundering regulations are ignored? | |
| I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. | |

Signature of Account Holder Signature of Joint Account Holder

For AHM Securities (Pvt.) Ltd.