APPLICATION TO OPEN A MARGIN TRADING ACCOUNT (PERSONAL)

PERSONAL INFORMATION

01 PERSONAL DETAILS				
Surname:	Main contact number (mandatory):			
Forenames:		Country:		
Title (Mr/Mrs/Ms/Other):		Time at current addre	ss (years/months):	
Date of birth:		Previous address if les	ss than three years: $_$	
Place of birth:				
Nationality:		Postal address:		
Home address:				
				Postcode:
	Postcode:			
	FOSICODE	Email address (manda	atory).	
02 TAX RESIDENCY				
Please could you confirm: The country or countries where you a Whether you are a US citizen? A US citizen has been defined by the IRS as: ar has been naturalised as a US citizen or an indix Your taxpayer identification number (you are a US citizen or a tax resident i	n individual born in the United States; an inc vidual whose parent is a US citizen. For furth TIN) if	lividual born in Puerto Rico, Gu er information please visit www	am or the US Virgin Islands .irs.gov/Individuals/Interna	Yes No
03 EMPLOYMENT DETAILS				
Employment Status:	Employed	Self-Employed	Retired	Unemployed
Occupation:		Industry:		
04 FINANCIAL DETAILS				
Approx. annual income before tax: \$		Approx. value of savir investments (net asse		ne): \$
Source of funds used for your trading with IG Limited:	Employment	Inheritance	Investment	Other (please specify)
Other:				
05 STATEMENT INSTRUCTI	ONS			

In the absence of other instructions from you, we will send statements by email.

YOUR KNOWLEDGE AND EXPERIENCE

Please complete the following section so we can assess the appropriateness of our services for you. It may be that we do not consider the account type you have selected to be appropriate for you. If this is the case, we will contact you to discuss further options.

1. To what extent over the past three years have you traded the following?

	Shares and/or bonds	Frequently	Sometimes	🗌 Rare	ly/never
	Exchange-traded derivatives (eg warrants, futures or options)	Frequently	Sometimes	🗌 Rare	ly/never
	OTC derivatives (eg CFDs, forex, binaries)	Erequently	Sometimes	🗌 Rare	ly/never
2.	How have you mostly traded these products?	Execution-or	nly and/or Advisor	y 🗌 Man	aged
3.	Do you have particular experience or qualifications which would assist your understanding of our services?				🗌 No
lf y	ves:				
	ccupational experience: I have a good knowledge of OTC, leveraged rivatives through working in the financial sector	Less than two More than tw			
	ualifications: I have a good knowledge of OTC, leveraged derivatives because a relevant professional qualification and/or my education or relevant training				

DECLARATIONS

I understand the nature and risks of Margin Trading via CFDs. I consent to the provision to me of the following by way of a website: the Risk Disclosure Notice and, if I am classified as a retail client, the Retail Foreign Exchange (RFX) Risk Disclosure, the Margin Trading Customer Agreement, the Summary Order Execution Policy and the Summary Conflicts Policy and I hereby confirm that I have read understood and agree to be bound by the terms of these documents. Finally, I confirm that I am aged 18 years or over and that the information provided by me in this form is true and correct; and I am not Politically Exposed Person (PEP) or Sanctioned.

🔀 Signature: _

Date:

ALL APPLICATIONS MUST BE ACCOMPANIED BY: EITHER PRESENTATION TO US OF: • YOUR PASSPORT, DRIVING LICENCE OR NATIONAL ID CARD (WHICH MUST CONTAIN A PHOTO); AND • AN ORIGINAL RECENT (NOT MORE THAN 6 MONTHS OLD) UTILITY BILL (NOT MOBILE PHONE),

OR ALTERNATIVELY BY PROVIDING TO US: CERTIFIED* COPIES OF THE ABOVE.

*Where copies are being submitted they should be certified as true copies by a lawyer, notary public, a chartered accountant, a bank manager, a police officer, an employee of the person's embassy or consulate, or other similar person.

We may need to contact you for further information/documentation



Once you have completed your details, please:
Print this form
Sign it
Return it to us

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