



Investors europe

WHITE/PRIVATE LABEL APPLICATION

Local : _____

Foreign : _____

White Label: _____

Private Label: _____

Name (If Individual Application): _____

Company Name: _____

Trade Name/s : _____

Nature of Business: _____

Address, City, State, Zip Code, and Country: _____

| | | | | | |
|---|--|-----------------|---|-------------------|--|
| Telephone No. | | Cell Phone | | Fax No. | |
| Email Address | | | Website Address | | |
| Type of Entity <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC | | | | | |
| Year of Incorporation | | Paid Up Capital | | Current Net Worth | |
| | | | | | |
| Contact Person | | | Designation/Position in the Entity | | |
| | | | | | |
| Membership in Any Exchange or Regulatory Agency/s | | | Other Registrations or Special Licenses | | |
| | | | | | |
| Are you currently working with any other brokerage firms? If yes, who and in what capacity? | | | | | |
| | | | | | |

Have you or your entity been the subject of any disciplinary action or proceeding by FSC, FSA, CFTC, NFA, FINRA, or any other regulatory body? If so, please explain in details when and history.

ALL QUESTIONS BELOW MUST BE ANSWERED IN CURRENT CAPACITY

How long have you been actively operating as introducing broker? _____

What is your aggregate portfolio size? _____

What is your total monthly trading volume? _____

How many individual retail accounts? _____ How many institutional accounts? _____

Total retail portfolio in US Dollars _____ Total institutional portfolio in USD _____

Total retail account's monthly turnover _____ Total inst'l. account's monthly t.o. _____

What is your average commission income for the last six (6) months? _____

How many staff and agents do you have? _____

Compensation Schedule

Pip Rebate : _____ Commission/Round Turn: _____ Others: _____
 (Per Standard Lot) (Per Standard Lot)

Mode of Payment: Monthly _____ Quarterly _____ Semi Annually _____ Annually _____

| | | |
|--|----------------|-------------|
| Bank Name | BIC/SWIFT Code | IBAN Number |
| Bank Address | Bank City | |
| Bank State/ Postal Code | Bank Country | |
| Intermediary Bank Name (If applicable) | BIC/Swift Code | IBAN |

| | | |
|---|-------------------------------------|--|
| Intermediary Bank Account No. | Beneficiary Name (Applicant's Name) | |
| Bank Address | Bank City | |
| Bank State/ Postal Code | Bank Country | |
| Other Information/Arrangements: (if applicable) : | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |

 APPLICANT'S SIGNATURE OVER PRINTED NAME

 DATE

For Institutional applicants, additional documentation will be required as follows:

- Certificate of Incorporation.
- Recent (up to 12 months) Certificate of Good Standing.
- Certificate of Registered Office.
- Certificate of Directors and Secretary.
- Certificate of Shareholders.
- Memorandum and Articles of Association/Incorporation.
- Resolution of the Board of Directors of the company granting authority to the one who will manage it.
- Bank Statement for the last three (3) months.
- Personal Guaranty (Optional)

For each Director, as per the certificate of Directors, and Authorized Representative the following documents are required:

- Copy of Passport. Photograph, personal details, signature, issue & expiry dates, place and date of issue, serial number to be clearly visible).
- Copy of Driving License, Passport or National Identity Card.
- Copy of a recent (up to 3 months) utility bill, local authority tax bill or a bank statement.

Please be noted that INVESTORSEUROPE may require additional documentation depending on our evaluation of the documents already submitted.