

NEW WORLD SECURITIES CO., INC.

MEMBER : PHILIPPINE STOCK EXCHANGE

Unit 2608 World Trade Exchange Bldg 215 Juan Luna St., Binondo, Manila

CUSTOMER ACCOUNT INFORMATION FORM

Account Classification: _____	Account No : _____
Account Name: _____	
Short Name: _____	Attention Name: _____
Nationality: _____	TIN: _____ SSS: _____
Driver's License#: _____	Credit Card No.: _____
Res. Cert. No.: _____	Place of Issue: _____ Date of Issue: _____

Residence Address: _____	Tel. No.: _____
	Fax No.: _____

Business Address: _____	Tel. No.: _____
	Fax No.: _____
E-Mail Address : _____	Mobile Number : _____

Date of Birth: _____	Of Legal Age ? _____	Sex : _____	Birthplace : _____	Number of Dependents : _____
Civil Status: _____	Name of Spouse : _____			
Occupation : _____	Nature of Work/Business : _____			

Is your Employer a Registered Broker Dealer ? _____	Are you an Officer / Director of a listed company ? _____
	Name of Corporation : _____
Are you an Officer, Director or Shareholder of a Broker Dealer ? _____	Position : _____
if YES, identify the Broker Dealer and describe relationship _____	
Name of Attorney (if applicable) _____	

Corporate Account : Indicate name of person/s authorized to transact in behalf of the Company		
Name : _____	Position : _____	Signature : _____
Name : _____	Position : _____	Signature : _____
Name : _____	Position : _____	Signature : _____

Discretionary Account: Indicate name of person/s authorized to exercise discretion		
Name : _____	Date Granted : _____	Signature : _____

If opened and maintained by a Representative, state Name and Address of BENEFICIAL OWNER	
Name : _____	Address : _____

Individual Account: Specimen Signature/s		
Signature : _____	Signature : _____	Signature : _____

Investment Objective : _____	Years of Experience in Capital Market Investment : _____
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SOURCE/S OF FUNDS		
Annual Income : _____	Assets : _____	Net Worth : _____

Should you refuse to disclose the financial information required, please indicate reason/s: _____

Do you have account with other broker dealers? _____	If Yes, please indicate name/s of broker/s: _____
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Customer's Bank : _____	Branch : _____	Account Number : _____
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SETTLEMENT INSTRUCTIONS Mode of Payment : _____	Documentation of Certificate : _____
Confirmation of Orders would be via : _____	(For Fax or E-Mail, please confirm Orders not later than 12:00 noon of the next business d
Are duplicate confirmations required ? _____	If YES, state Name, Relationship and Address of Recipient _____
Statement / Trade Confirmations / Other Correspondence Disposition : _____	

I/We hereby certify that the information given in this Customer Account Information Form is true and correct to the best of my knowledge.
 I/We have read and agree to be governed by the terms and conditions relative to this Account as enumerated in the following pages, as well as by the rules and regulations of the Philippine Stock Exchange, Securities and Exchange Commission, Bangko Sentral ng Pilipinas, the Anti-Money Laundering Council, the Bureau of Internal Revenue, and other appropriate governmental agencies.

_____ Client's Signature Over Printed Name	_____ Client's Signature Over Printed Name
Use this space for joint /C or Corporate A/C requiring 2 or more signatories	

For NWSI USE ONLY:

Commission Rate : _____	Referred By : _____	REQUIREMENTS: FOR INDIVIDUAL ACCOUNT: Photocopy of valid identification card containing photo and signature (i.e. Driver's License, Passport, SSS , TIN Card) FOR CORPORATE ACCOUNT: (1) SEC Cert. of Registration; (2) Articles of Incorporation & By-laws; (3) Secretary's Cert. authorizing the Corporation to invest in securities/stocks and engage the services of NWSI as Stockbroker; (4) Secretary's Cert. designating the authorized signatories to transact for the Corporation and sign/endorse certificates.
Min. Comm. : _____	Approved By : _____	
Credit Limit : _____	Date Approved : _____	
Initial Deposit : _____	Date Opened : _____	
Margin Rate: _____		
Interest Rate: _____		
Agent's Signature _____	CAIF Encoded By : _____	
	Reviewed By : _____	