



## OMNIUM Trading Account – Execution Only Account Application Form – Individual(s)

### Thank you for choosing OMNIUM Investment Platform

The OMNIUM Trading Account – (Execution Only) is designed for Financial Advisors and their clients, who are comfortable making their own investment decisions individually or with their Financial Advisor. OMNIUM will not provide financial advice and can only receive instructions from the Financial Advisor. The account allows investment in shares, funds and exchange traded funds (ETF's).

Before the account is opened, it is important that the Financial Advisor has taken time to read and understand all of the account opening information provided to ensure that the Omnium Trading Account-(Execution-Only) is suitable for the beneficiary.

In order to comply with the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010 , as amended by the Criminal Justice Act 2013 and (Amendment) Act 2018 (and as may be amended from time to time) we are required to verify the identity of each new Financial Advisor and beneficiary. It is important to note that we will not be able to open an account unless the correct documents have been received.

We would ask you to read this form carefully, complete, sign, enclose the appropriate Identification documents and return it to OMNIUM Investment Platform at Suite 1, The Mall, Beacon Court, Sandyford, Dublin 18.

**WARNING:** The value of your investment may go down as well as up. You may lose some or all of your invested capital. This account does not constitute investment advice.

**WARNING:** A client who is classed as a professional client will be treated less favourably than a retail client and will therefore receive less regulatory protection.

Professional clients do not benefit from the Investor Compensation Scheme.

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### 1. Financial Advisor Details

Name of Legal Entity: \_\_\_\_\_

Country of Incorporation: \_\_\_\_\_

Legal Entity Identifier: \_\_\_\_\_

Nature and Purpose of Entity: \_\_\_\_\_

Registered Office address: \_\_\_\_\_

MiFID Professional Categorisation:  Professional  Eligible Counterparty

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### 2. Financial Advisor Contact Details

Position: \_\_\_\_\_

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

*You must provide a daytime phone number and mobile phone number. These will be used to contact you in the event of a problem with a trade.*

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### 3. Beneficiary Contact Detail

Please provide the following information about the individual(s) you are acting for:

Individual Account  Joint Account

#### Individual Account

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

#### Joint Account

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

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**4. Individual Personal Details**

Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Are you a US Citizen or Green Card Holder?

 Yes  No**Joint Account**

Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Are you a US Citizen or Green Card Holder?

 Yes  No

Tax information is required to comply with Foreign Account Tax Compliance Act (FATCA) and the Common Reporting Standards (CRS)

Please detail ALL countries in which you are a tax resident and the applicable Tax ID e.g. a PPS number:

**Individual**

Country of Tax Residency      Tax ID Number

\_\_\_\_\_

\_\_\_\_\_

**Joint Account**

Country of Tax Residency      Tax ID Number

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you hold dual or multiple nationalities we may require additional information as part of European Regulations on transaction reporting under MiFIR. Please indicate your status here;

**Individual**

Do you hold Dual or Multiple Nationalities?

 Yes  No**Joint Account**

Do you hold Dual or Multiple Nationalities?

 Yes  No

Please provide your PPS details

**Individual Account**

PPS Number \_\_\_\_\_

**Joint Account**

PPS Number \_\_\_\_\_

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**5. Please indicate source AND amount of funds - This refers to the funds provided for this investment.****SOURCE** Salary / Bonus Inheritance Savings Redundancy Sales of Shares Transfer of shares / share cert Other - please specify**AMOUNT** Less than €25,000.00 €25,000.00 to €65,000.00 €65,000.00 to €125,000.00 €125,000.00 plus

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## 6. Please indicate source of wealth

This refers to how you accumulated your total net wealth. For example, your source of funds for this investment may be as a result of a sale of shares whereas your total net worth may have been accumulated as a result of your occupation, i.e. Salary / Bonus.

### SOURCE

- |                                      |   |
|--------------------------------------|---|
| <input type="radio"/> Salary / Bonus | <input type="radio"/> Investments that have matured   |
| <input type="radio"/> Inheritance    | <input type="radio"/> Sales of shares                 |
| <input type="radio"/> Savings        | <input type="radio"/> Transfer of shares / share cert |
| <input type="radio"/> Redundancy     | <input type="radio"/> Other ( <i>please specify</i> ) |

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## 7. Bank Details (This should be the nominated bank account you wish funds to be transferred to)

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Account Name: \_\_\_\_\_

IBAN: \_\_\_\_\_ BIC: \_\_\_\_\_

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## 8. Politically Exposed Persons (PEP)

Has anyone identified above now or in the last 12 months been;

- a head of state, head of government, government minister or deputy or assistant government minister
- a member of parliament
- a member of a supreme court, constitutional court or other high level judicial body whose decisions, other than in exceptional circumstances, are not subject to further appeal
- a member of a court of auditors or of the board of a Central Bank
- an ambassador, charge d'affairs or high-ranking officer in the armed forces
- a close associate of any of the above
- an immediate family member of any of the above

Yes     No

*If YES, please provide further detail.*

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## 9. Account Categorisation (to be completed by Financial Advisor)

Where applicable, please confirm how this account is categorised under MiFID by the current provider?

Retail                       Professional

## Beneficiary Declaration and Consent

By signing this declaration page you agree to the following:

- I/We confirm that my/our Financial Advisor, detailed in Section 1 above is authorised to act on my/our behalf.
- I/We confirm my/our Financial Advisor has provided, explained and I consent to the Pershing Securities International Limited terms of business 'the Pershing Agreement' .
- I/We are not a US person(s) for the purposes of US Federal income tax and that I/we are not acting for, or on behalf of, a US person. A false statement or misrepresentation of tax status by a US person could lead to penalties under US law. If your tax status changes or you become a US citizen or a resident, you must notify us within 30 days.
- I/We acknowledge that information contained in this form may be reported to tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.
- I/We understand that OMNIUM can only accept instructions from my/our Financial Advisor, detailed in Section 1, above.
- I/We confirm the details provided in Sections 3, 4, 5, 6, 7 and 8 are complete and accurate and I/we undertake to notify my/our financial advisor immediately should any of the information change.
- I/We consent to the Financial Advisor charges detailed below, to be deducted in addition to OMNIUM charges as detailed in the fee sheet provided.
- I/We acknowledge that OMNIUM will not owe any duty to advise on the merits, suitability or appropriateness of any transaction or series of transaction entered into and that services will be provided on 'execution only' basis.
- Where I have requested that an order be executed in an instrument admitted to trading on a Regulated Market 'RM' or Multilateral Trading Facility 'MTF', then I acknowledge that PSL may execute such order outside an RM or MTF in accordance with PSL's execution policy and I hereby give my consent to such execution.

Beneficiary Name:

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Beneficiary Name:

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Beneficiary Signature:

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Beneficiary Signature:

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Date (DD/MM/YY):

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Date (DD/MM/YY):

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## Financial Advisor Charges

Initial Charge: \_\_\_\_%

The initial charge is based on the opening account balance. The above percentage is deducted prior to any transactions.

Annual Management charge: \_\_\_\_ %

The annual management charge is based on the value of the account and applied monthly in arrears.

## Financial Advisor Declaration and Consent

By signing this declaration page you are applying to open a OMNIUM Trading Account – (Execution-Only) and agree to the following:

I/We have carefully read, acknowledge, understand and consent to the terms of the OMNIUM 'Terms of Business' document which I have been presented with. I/We hereby agree that by signing this acknowledgement that I/we will be bound by all terms and conditions contained in the following documents:

- OMNIUM Trading Account-(Execution-Only) Application Form
- OMNIUM Terms of Business
- OMNIUM Fee Schedule
- Pershing Terms of Business

I/We confirm that we have met the beneficiary detailed in section 3, I/we have explained the above documents and confirm that the services to be provided are suitable for the beneficiary.

I/We confirm the details provided in the OMNIUM Trading Account-(Execution-Only) Application Form are a complete and accurate record of all information relevant and necessary to allow OMNIUM to provide an execution only service to me/us.

I/We acknowledge that OMNIUM will arrange for a nominees account to be opened with Pershing Securities International Limited on my/our behalf for the beneficiary detailed in Section 3.

I/We acknowledge, understand and accept that OMNIUM will not accept any instructions from the persons detailed in Section 3, above.

By opening this account and signing below, the account owner represents and warrants that he/she/it is not a US Person for the purposes of US Federal income tax and that he/she/it is not acting for, or on behalf of a US person. A false statement or misrepresentation of tax status by a US person could lead to penalties under US law. If your tax status change or you become a US citizen or a resident, you must notify us within 30 days.

I/We confirm we have the legal capacity and authority to open this account and to sign on behalf of the entity listed in Section 1.

Financial Advisor Name:

Financial Advisor Name:

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Authorised Signature:

Authorised Signature:

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Date (dd/mm/yy):

Date (dd/mm/yy):

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Before returning this application, please ensure that you have provided us with the following:

## Proof of Identity

Please enclose a *certified copy* of **one** of the following for each individual listed in section 3 above:

- Current Passport (Excluding Passport Card)
- Current full Irish/UK driving licence (Front & back photo); or
- Current National Identity card

## Proof of Address

Please enclose a *certified copy* of **one** of the following for the Individual(s) listed in Section 3:

- Bank account or credit card statement from a regulated financial institution - dated within the last 6 months
- Utility bill (for example, electricity, gas or landline / broadband bill) – dated within the last 6 months
- Official document issued by the Revenue Commissioners addressed to the individual Eg. Current Balancing Statement, C2 Tax Credit or Notice of Determination of Tax Credit – dated within the last 12 months
- Official document from the Dept of Social and Family Affairs addressed to the individual– dated within the last 12 months
- Current local authority document (for example, refuse collection bill or water charge bill) – dated within the last 6 months
- Current household / motor insurance certificate or renewal notice – dated within the last 12 months

## Tax Requirements

- Completed W8BEN form

## Notes:

- Copies of Proof of ID and Proof of Address must be certified by an accountant, solicitor, garda or regulated entity based in Ireland
- Certified Proof of ID must be in date, all details must be clearly visible including the photograph, the document number, the expiry date and all 4 corners of the document must be visible
- Certified Proof of Address must be issued to the home address, bear the name and address provided in the application, and all 4 corners of the document must be visible
- The name on your photographic identification (e.g. name on your passport) must match the name on your proof of address (e.g. full name on your gas bill)
- Foreign documents must be translated to English by a qualified translator and certified as above
- Please do not send your original documents as we are unable to accept responsibility for the safe return of same
- We do not accept E-Statements.

OMNIUM will advise your financial advisor if further information and documentation is required to verify your identity.



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