Account Application Form – Individual & Sole Trader

Section A: Account Information

Thank you for choosing Great International Pty Limited (Great International) and its partner Collinson Forex Limited (CFX) - service providers (SP). This Account Application Form must be read together with CFX's Terms and Conditions on their website. If we accept your application for an Account, the agreement between us and you (the Account Holder) will comprise this Account Application Form and CFX Terms and Conditions.

| . Personal Details | | | |
|---|--|--|----------|
| iven name | Surname | Nationality Mobile number | |
| Guohua | Qin | China 0421179000 | |
| ther names and aliases | Gender | Residential Address | |
| | Female | 84 Roslyn St City Country Postcode | |
| ate of birth | Place of birth | Brighton, VIC Australia 3186 | |
| 2 8 / 1 2 / 1 9 5 8 | | Email | |
| /eChat | | taylorjiang369@hotmail.com | |
| | | taylor hangsos & not mainten | |
| . Employment or Busin | ess Details | | |
| mployer / Trading Name | | Business Physical Address | |
| | | City Country Bostoods | |
| egistration / Incorporation nur | mber | City Country Postcode | |
| | | | |
| Job Title Business phone number | | Email | |
| | | | |
| | | | |
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| . Nature and Purpose | | | |
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| Account Behaviour Baselir | | | |
| Account Behaviour Baselir a) Approx. number of an | | e) Source of funds/wealth E.g. Personal savings in AU: inheritance: property sale | e in CN: |
| Account Behaviour Baselin a) Approx. number of an 3-4 | nnual transactions | e) Source of funds/wealth E.g. Personal savings in AU; inheritance; property sale business revenue; sale of company assets | e in CN; |
| Account Behaviour Baselin a) Approx. number of an 3-4 b) Approx. annual trade | nnual transactions | E.g. Personal savings in AU; inheritance; property sale | e in CN; |
| Account Behaviour Baselin a) Approx. number of an 3-4 b) Approx. annual trade | volume (in NZD) | E.g. Personal savings in AU; inheritance; property sale business revenue; sale of company assets Personal savings f) Purpose of transactions | |
| Account Behaviour Baselin a) Approx. number of an 3-4 b) Approx. annual trade \$ 5000 c) Approx. number & fre | volume (in NZD) | E.g. Personal savings in AU; inheritance; property sale business revenue; sale of company assets Personal savings f) Purpose of transactions E.g. Repatriate overseas salary back to NZ; purchasing | |
| Account Behaviour Baselin a) Approx. number of an 3-4 b) Approx. annual trade \$ 5000 c) Approx. number & free l.e. 5 weekly / 3 monthly | volume (in NZD) | E.g. Personal savings in AU; inheritance; property sale business revenue; sale of company assets Personal savings f) Purpose of transactions E.g. Repatriate overseas salary back to NZ; purchasing in NZ; paying tuition and living cost in NZ | |
| Account Behaviour Baselin a) Approx. number of an 3-4 b) Approx. annual trade 5 5000 c) Approx. number & fre 1.e. 5 weekly / 3 monthly Quarterly | volume (in NZD) equency of transactions / 2 quarterly | E.g. Personal savings in AU; inheritance; property sale business revenue; sale of company assets Personal savings f) Purpose of transactions E.g. Repatriate overseas salary back to NZ; purchasing | |
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| Account Behaviour Baselin a) Approx. number of an 3-4 b) Approx. annual trade \$ 5000 c) Approx. number & fre 1.e. 5 weekly / 3 monthly Quarterly d) Approx. average trans 1.e. the average size of trans | volume (in NZD) equency of transactions / 2 quarterly saction volume (in NZD) | E.g. Personal savings in AU; inheritance; property sale business revenue; sale of company assets Personal savings f) Purpose of transactions E.g. Repatriate overseas salary back to NZ; purchasing in NZ; paying tuition and living cost in NZ Purchasing | |
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^{*}For <u>Forward Foreign Exchange</u> - you will need to provide either a <u>Large Wholesale Investor Certificate</u> or an <u>Eligible Investor Certificate</u> depending on your classification. Please kindly contact us for the criteria.

Section B: Account Ownership and Control Structure

Authorized persons

| Authorized person 1 | | | |
|------------------------------|------------|----------|--|
| Relationship with the Applic | ant | | |
| Son | | | |
| Given name | Surname | | |
| Taylor | Jiang | | |
| Other names and aliases | | Gender | |
| | | Male | |
| Date of birth | Place of I | oirth | |
| 28/05/1985 Y Y Y | 7 | | |
| Nationality | Mobile num | ber | |
| | | | |
| Residential Address | | | |
| 84 Roslyn St | | | |
| City Country | | Postcode | |
| Brighton, VIC Chin | a | 3186 | |
| Email | | | |
| taylorjiang369@h | otmail.co | m | |
| | | | |

| Authorized person 2 | | | |
|-------------------------------|----------------|--|--|
| Relationship with the Applica | ant | | |
| | | | |
| Given name | Surname | | |
| | | | |
| Other names and aliases | Gender | | |
| | | | |
| Date of birth | Place of birth | | |
| D D M M Y Y Y Y | , | | |
| Nationality | Mobile number | | |
| | | | |
| Residential Address | | | |
| | | | |
| City Country | Postcode | | |
| | | | |
| Email | | | |
| | | | |

Section C: Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) Declaration

Tax Residence

Are you a tax resident of another country (other than New Zealand)?

Yes* (please list all other countries of tax residency)

No (go to the next section)

If you are a <u>US person</u>, please complete Form W-9 or submit a self-declaration of FATCA status. (You may also wish to visit the IRS website to determine if you need to complete and submit any additional IRS forms)

The term 'US person' means:

- US citizens, including those resident outside US
- US permanent residents, including green card holders
- US tax residents
- People born outside the US with a US parent

- Certain persons who spend a significant number of days in the US each year
- Corporations, estates and trusts, and other entities controlled by US persons

| Country of Tax Residence | Tax Number (or equivalent) | Not available | Please provide an explanation if Tax Number is not available |
|--------------------------|----------------------------|---------------|--|
| Australia | 865444885 | | |
| | | | |
| | | | |

Section D: Politically Exposed Person (PEP) Self-certification

Under Anti-Money Laundering and Countering Financing of Terrorism Act 2009, Financial Institutions have an obligation to check whether a client is a Politically Exposed Person (PEP). Please read definitions below carefully, answer "Yes" or "No" in each case.

Positions

Do you, or an immediate family member*, hold (or held at any time in the last 12 months) any of the following positions in any country:

| 1. | Head of state or head of a country or government | O Yes | No |
|----|---|-------|-------------|
| 2. | Government minister or equivalent senior politician | ○ Yes | ✓ No |
| 3. | Supreme court judge or equivalent senior judge | ○ Yes | Ø No |
| 4. | Governor of a central bank or any other position that has comparable influence to the governor of the Reserve Bank of New Zealand | ○ Yes | Ø No |
| 5. | Senior foreign representative, ambassador, or high commissioner | ○ Yes | Ø No |
| 6. | High-ranking member of the armed forces | ○ Yes | ₽No |
| 7. | Board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any state enterprise | ○ Yes | ⊘ No |

Beneficial Ownership

Do *you* have:

1. Joint beneficial ownership of a legal entity or arrangement (e.g. a trust), or any other close relationship, with a person in any of the *positions* above?

○ Yes 🗹 No

2. Sole beneficial ownership of a legal entity or arrangement (e.g. a trust) that to exists for the benefit of a person in any of the positions above? ○ Yes 🗸 No

- * The term 'Immediate family member' means:
 - a spouse or partner (a person who is considered by relevant national law as equivalent to a spouse);
 - a child, and a child's spouse or partner; or
 - a parent.

Section E: Acknowledgment

1. Electronic Verification

To meet the requirements under the Anti-Money Laundering and Countering Financing of Terrorism Act 2009 (AML/CFT Act), we must verify our client's identity and residential address.

One option is to try and do this electronically; however, as not everyone can be verified electronically, please be advised that we may still contact you for further verification if the electronic verification fails.

As part of the electronic verification processes, your personal details are disclosed to and matched with information held by the issuer of the identity document containing your personal details e.g. your drivers' licence or the official record holder of your information, via third party systems.

We will only use your personal details for the purpose of verification under the AML/CFT Act.

By signing this form, you confirm that you are authorized to provide personal details presented and you consent to your information being checked with the documents issuer or official record holder via third party systems for the purpose of confirming your identity.

2. Anti-Money Laundering and Countering Financing of Terrorism Act 2009

I/We acknowledge that the service providers (SP) are subject to AML/CFT laws in New Zealand. This may include reporting of suspicious activities required by AML/CFT laws to the Commissioner of the New Zealand Police.

I/We acknowledge that SP may use a third party system to verify my identity to determine whether I am/we are recorded with any notation as Politically Exposed Persons and whether I/we have a criminal record.

I/We agree to provide SP (and its employees, agents, nominees and related entities) with reliable information and other assistance it reasonably requires to establish the bona fides of the source of my/our funds/wealth, and to comply with the AML/CFT laws.

I/We represent and warrant that I/we have no cause to believe the funds used to FX trades are the proceeds of crime or will be used to finance terrorism.

I/We agree to indemnify SP (and its employees, agents, nominees and related entities) against any loss it suffers as a result of me/us providing incorrect or incomplete information.

I/We understand that failure to comply with the reasonable request for information by SP to satisfy AML/CFT laws will result in my/our application being rejected.

3. Personal Information and Privacy Act

I/We consent and agree that all information about me/us disclosed in this form may be used by SP (and its employees, agents, nominees and related entities) or disclosed to and used for the purpose of completing/monitoring the transactions, including disclosure to the regulatory bodies and in compliance with the AML/CFT laws.

I/We know that SP may use the information on this form for the purpose of:

- Creating and maintaining risk related models, including but not limited to risk assessment, risk analysis and risk management;
- Fulfilling reporting obligations, including but not limited to Annual AML/CFT Report, SAR, PTR, CRS, FATCA and any other reporting obligations imposed by New Zealand laws and regulations;
- Responding to the inquiries of banks or any other regulatory bodies;
- Marketing products, services and other subjects under the umbrella of Collinson & Co;
- Meeting the requirements to make disclosure under the requirements of any law binding on us or under and for the purpose of any guidelines issued by regulatory bodies or other authorities to comply;
- Any other purposes relating to the purposes listed above.

I/We know that I/we can request such access to and correction of any information held about me/us by SP.

Notwithstanding the foregoing, I/we acknowledge that where a suspicious activity report has been made about me/us, the person who has made that report is not able to give me/us access to any information about that report (including its existence) and I/we have no right to request information in that report to be corrected.

I/We will inform SP of any changes to the information provided by me/us to SP.

United Stated (US) Foreign Account Tax Compliance Act (FATCA) Automatic Exchange of Information (AEOI) and the Common Reporting Standard (CRS)

I/We acknowledge that SP have certain obligations to report information held about me/us under FATCA and CRS and I/we consent to SP (and its employees, agents, nominees and related entities) disclosing all such information to the necessary parties.

I/We acknowledge that I have examined the information provided and it is true, correct, and complete to the best of my/our knowledge and belief.

I/We understand and agree that on specific request from any relevant tax authorities or any party authorized to audit or conduct a similar control for tax purposes, the information contained in this section and/or a copy of this form can be disclosed to such tax authorities or such party.

In case of any change in circumstances that causes the information contained herein to become incorrect I/we recognize that I/we will have to provide a suitable updated declaration within 30 days of such change in circumstances.

Please be advised that penalties under the AEOI laws may apply if you provide false or misleading information, fail to provide this information, or fail to provide an update if there is a material change to the information you have provided. This includes civil penalties of \$1,000 per offence that Inland Revenue can apply. Substantial criminal penalties can be imposed by the courts for knowledge-based offences. These penalties apply for the purposes of both FATCA and CRS.

5. Declaration and Signature

By signing this form, I agree and confirm that:

- My answers above are correct.
- I will promptly send notification should my answer in any category above changes in the future.

Date:

DD/MM/YY

10/08/2021

Signed by:

Full Legal Name of Applicant and Authorized Person

Guohua Qin

Signature



Full Legal Name of Applicant and Authorized Person

logh

Taylor Jiang

Signature

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Document Requirements

IDENTITY VERIFICATION OF NEW APPLICANT

Identity verification must be completed in all cases where the applicant is new to us in accordance with Anti-Money Laundering and Countering Financing of Terrorism Act 2009 (AML/CFT Act). If you opt out of electronic verification, you must provide us with a certified copy of your ID and Proof of Address or our staff will have to verify your ID and Proof of Address in person. ID must be valid for a minimum of 6 months from the date of expiration. An updated ID must be provided once it is expired. An updated Proof of Address must be provided once the address is changed. Certified ID and Proof of Address must be certified by a trusted referee.



Proof of Identification

Please select one of the following options (please note Option 2 and 3 require a secondary supporting document).

| | | Primary ID document | PLUS – ONE of the Secondary supporting document |
|--|----------|---|---|
| | Option 1 | Passport (including the signature page)ORFirearms Licence | Not Required |
| | Option 2 | O Driver Licence | Credit card or debit card (with name and signature) Bank statement (no more than 3 months old) Document issued by a government agency (with name and signature) e.g. SuperGold card Statement from the Inland Revenue Department |
| | Option 3 | Birth Certificate OR Citizenship Certificate | Driver licence18+ CardInternational driving permit |

2. Proof of Address

| Docume | Documents provided must show your current residential address and no more than 3 months old. | | | | |
|--------|---|--|--|--|--|
| | Select ONE of the following options: | | | | |
| | Bank statement or correspondence | | | | |
| | Utility bill (i.e. gas, power, water, phone, internet etc.), council rates bill, or IRD statement/correspondence | | | | |
| | Insurance policy or letter from your KiwiSaver provider | | | | |
| | Letter from an electoral office | | | | |
| | Tenancy agreement for the place you're currently renting | | | | |
| • | Letter from educational institution (must be letterhead paper and signed by person in authority confirming residential address) | | | | |
| | Court document | | | | |
| | Car registration notification/demand | | | | |
| | Letter/notification from ACC, local council or government organization | | | | |

3. Other Information required -if applicable

Please indicate and attach the following documents if applicable.

| | Please attach the following: |
|--------------------------|---|
| Registered Company | Company extract (contain director and shareholder information) |
| Forward Foreign Exchange | Eligible Investor Certificate OR Large Wholesale Investor Certificate |

For Trust Only:

Please include all 3 types of documents below: trust deed, EDD questionnaire and evidence for source of funds/wealth.



| Trust Deed | Copy of the Trust Deed |
|------------|---|
| EDD Form | Enhanced Customer Due Diligence (EDD) Questionnaire |

| | Types of funds/wealth | Origin of funds/ wealth | Examples of supporting document required |
|--|----------------------------|-------------------------------------|---|
| | Employment | Salary or wages | Pay slip; bank statement showing regular payments from employer; IRD tax returns |
| | Self-employed | Business revenue | Latest financial or audit report; IRD tax returns; a letter from your lawyer or accountant to prove your income |
| | Sale of business or assets | Sales revenue | Latest financial or audit report; a letter from your lawyer or accountant to prove your income; documents related to the sales |
| | Investment products | Stock, bond, wealth management fund | Investment agreement; transaction history with corresponding bank statement; investment certificate; a letter from your lawyer or accountant to prove your income |
| 5 throat | Sale of property | Sales revenue | Sale and purchase agreement with corresponding bank statement; a letter from your lawyer or accountant to prove your income |
| Evidence of Source of Funds / Source of Wealth | Inheritance | Inheritance | Certified copy of the will; probate documents; a letter from your lawyer or accountant to prove your income |
| | Pension | Retirement allowance | Bank statement showing regular deposits/lump sum withdrawal from pension/superannuation service providers |
| | Gift | Gift from a donor | Contract of gift; source of funds/wealth of the donor; a letter from your lawyer or accountant to prove your income |
| | Savings | Savings accumulated over the time | Bank statement of the past 6 months |
| | Lotto or gambling | Winnings from lottery or gambling | Certificate from the lottery service provider; proof of winnings from the casino |
| | Relationship property | Joint estate | Court order; settlement agreement; a letter from your lawyer or accountant to prove your income |
| | Rental property | Rental income | Rental agreement with corresponding bank statement |

^{*}You may be asked for one or more supporting documents depend on the weight of proof of the documents provided.