



## CORPORATE ACCOUNT APPLICATION

Please complete all sections. Please, type or print clearly using BLOCK CAPITALS failure to do so could cause delay in opening your account. Please call +44 800 1223 150 should you have any questions or email [clientmanagement@valbury.co.uk](mailto:clientmanagement@valbury.co.uk)

\* Denotes a mandatory field

### DETAILS OF CORPORATE

Full Name (of organisation)\*

Country of Incorporation or Registration

Date of incorporation DD  MM  YYYY

Registered Number

### CORRESPONDENCE ADDRESS

Address Line 1\*

Address Line 2

Address Line 3

City/Town\* County/Province/State

Postcode/Zipcode\* Country of Residence\*

Tel Fax

Website

### REGISTERED ADDRESS

Same as correspondence address above Tick Box  If this field is not completed then the following address fields should be completed.

Address Line 1\*

Address Line 2

Address Line 3

City/Town\* County/Province/State

Postcode/Zipcode\* Country of Residence\*

### BUSINESS

Company's Business Type

Is your organisation registered or regulated for the provision of financial services?\* YES  NO

If yes, name of regulator?

### ACCOUNT OPERATION

Email Address for this account\*

(We shall send all correspondence to this email address)

Contact telephone number for the operation of this account\*

Country Code:

Number:

### PRINCIPAL CONTACT 1

(This is the individual who will be giving instructions to the account)

Title\* Mr  Miss  Mrs  Ms  Other

First (given) Names\*

Last Name (Surname)\*

Date of birth\* DD  MM  YYYY

Residential Address Line 1\*

Address Line 2

Address Line 3

City/Town\* County/Province/State

Postcode/Zipcode\*

Mobile Tel No.\*

**PRINCIPAL CONTACT 2**

Title Mr  Miss  Mrs  Ms  Other

First (given) Names

Last Name (Surname)

Date of birth DD  MM  YYYY

Address Line 1

Address Line 2

Address Line 3

City/Town  County/Province/State

Postcode/Zipcode

Mobile Tel No.

**TRADING EXPERIENCE**

To be provided in respect of those individuals who will provide instructions on the account. To what extent over the last 3 years have you traded in the following?

Over the counter (OTC) derivatives such as FX and CFDs  
Frequently  Occasionally  Rarely or Never

Exchange traded derivatives (ETD) such as FUTURES and OPTIONS  
Frequently  Occasionally  Rarely or Never

Securities such as SHARES and BONDS  
Frequently  Occasionally  Rarely or Never

Do you have educational, professional qualifications or work experience that you consider allow you fully to understand the risks of our products and services?\* YES  NO

If yes please provide details

What is the purpose of opening an account?

- Investment
- To achieve speculative gains
- Hedge against investment or trade risks
- Dealing for or on behalf of clients
- Other (please state)

**SECURITY QUESTION\***

Choose one option only.

For use on the account by all principal contacts.

We may ask you to confirm this when you call Valbury Capital Limited.

- Where was your mother's birth place?
- What was the make of your first car?
- Who was your first employer?

\*SECURITY ANSWER:

**ELECTRONIC INFORMATION**

Please note we will send all information and statements electronically to your email address and/or your trading account. Should you require material in paper format please call the following number +44 800 1223 150 or email clientmanagement@valbury.co.uk for an explanation of our charges.

**TRADING PLATFORM CHOICE\***

VCL Multi Trader  Vanguard  TraderTools

Please note that only one system can be chosen. For a full explanation please see our website [www.valburycapital.com](http://www.valburycapital.com)

**BANK DETAILS**

Your account with us will be held in US Dollars, remittances in other currencies will be converted into US Dollars as a standing instruction from you.

Please provide bank details from which the account will be funded.

Name\*

Bank Name\*

Bank Address\*

Bank Account Number\*

Sort Code\*

IBAN

Swift Code/BIC Code

Please note that we will only accept funds from a bank account in our account holder's name, and will return funds only to that account.

IBAN/BIC numbers are required when sending funds back to your bank.

**DECLARATION BY SIGNATORY**

I agree that you may make anti-money laundering, credit reference and other checks about me and any other persons named in the application and may collect, process and transmit personal information about me/us as set out in your Privacy Policy and Terms of Business (and I have permission from those other persons to provide this confirmation). This may include (and is not limited to) collecting and using information about the operation of the account, providing information to any person who introduced me/us to you, and transferring personal information to your service providers, including providers who are based overseas. You may also provide me/us with information about other products and services you offer, and I/we can opt-out of receiving such information by writing to you.\*

YES  NO

I confirm the applicant consents to the execution of its orders outside a regulated market or Multilateral Trading Facility (MTF)\*

YES  NO

I confirm that the applicant consents to the provision of information by way of a website.\*

YES  NO

I confirm that the applicant has read, understood and agrees to be bound by the Valbury Capital Limited:\*

- Terms of Business
- Summary Conflicts Policy
- Summary Execution Policy
- Risk Warning

Each of which can be found at: [www.valburycapital.com/regulations.htm](http://www.valburycapital.com/regulations.htm)

YES  NO

I confirm that the applicant understands the risks of the products and services you provide, that I have full power and authority to make this application on behalf of the applicant and that the information provided in this application is true and correct.

YES  NO

Signature:\* (of account signatory)

Name:\*

Date:\*

DD  MM  YYYY

**Note: Signatory above should be validly appointed by board resolution (see next column)**

**BOARD RESOLUTION\* (to appoint account signatory)**

I (Print name and title )

being a duly appointed (Particulars of office held)

of (Name of Corporate)

("the Corporate")

hereby certify that the following resolutions were passed at a duly convened meeting of the governing body of the Corporate on

("Date")

It was resolved as follows:

1. To open an account or accounts in the name of the Corporate with Valbury Capital Limited for the purpose of dealing in spot foreign exchange and such other financial instruments as may be provided from time to time.
2. To authorise severally and jointly the persons whose names and specimen signatures appear below ("the Signatories") to do all things necessary or expedient on behalf of the company and in its name in order to open, operate and close such account or accounts, including, but not limited to, to agree terms in relation to their opening, operation and closure, to sign any document in connection with the opening and operation of such accounts, to charge the Corporate's assets, to give oral and written and electronic instructions to effect transactions with Valbury Capital Ltd, and, to the extent of their own authority here given, to delegate their powers to other persons.

Print name and title (of account signatory)

Specimen signature

Print name and title (of second account signatory)

Specimen signature

3. That this Resolution be communicated to Valbury Capital Ltd who are entitled to rely upon it until a certified copy of an amending resolution has been passed and provided to Valbury Capital Ltd.

Signature (to certify board resolution)

Date

**PART A: BENEFICIAL OWNERS**

Please provide the details of all individuals who ultimately own or control 25% or more of the shares or voting rights of the applicant or otherwise exercise control over it.

**Beneficial Owner 1**

First Name [ ]  
Last Name [ ]  
Date of Birth [ ]  
Residential Address Line 1 [ ]  
Address Line 2 [ ]  
Address Line 3 [ ]  
City/Town [ ] County/Province/State [ ]  
Postcode/Zipcode [ ] Country of Residence [ ]  
Percentage shareholding or beneficial ownership of the applicant [ ] %  
Is this person also a director or other member of the governing body of the applicant? YES  NO

**Beneficial Owner 2**

First Name [ ]  
Last Name [ ]  
Date of Birth [ ]  
Residential Address Line 1 [ ]  
Address Line 2 [ ]  
Address Line 3 [ ]  
City/Town [ ] County/Province/State [ ]  
Postcode/Zipcode [ ] Country of Residence [ ]  
Percentage shareholding or beneficial ownership of the applicant [ ] %  
Is this person also a director or other member of the governing body of the applicant? YES  NO

Is this person also a director or other member of the governing body of the applicant? YES  NO

**Beneficial Owner 3**

First Name [ ]  
Last Name [ ]  
Date of Birth [ ]  
Residential Address Line 1 [ ]  
Address Line 2 [ ]  
Address Line 3 [ ]  
City/Town [ ] County/Province/State [ ]  
Postcode/Zipcode [ ] Country of Residence [ ]  
Percentage shareholding or beneficial ownership of the applicant [ ] %  
Is this person also a director or other member of the governing body of the applicant? YES  NO

**Beneficial Owner 4**

First Name [ ]  
Last Name [ ]  
Date of Birth [ ]  
Residential Address Line 1 [ ]  
Address Line 2 [ ]  
Address Line 3 [ ]  
City/Town [ ] County/Province/State [ ]  
Postcode/Zipcode [ ] Country of Residence [ ]  
Percentage shareholding or beneficial ownership of the applicant [ ] %  
Is this person also a director or other member of the governing body of the applicant? YES  NO

Please note, we need proof of identity and proof of residential address for each beneficial owner and director. (Please see section What to do next)

**PART B: DIRECTORS**

Please provide the information requested about any further directors of the applicant or members of the governing body

**Director 1**

First Name

Last Name

Date of Birth

Residential Address Line 1

Address Line 2

Address Line 3

City/Town

County/Province/State

Postcode/Zipcode

Country of Residence

Percentage shareholding or beneficial ownership of the applicant

 %

**Director 2**

First Name

Last Name

Date of Birth

Residential Address Line 1

Address Line 2

Address Line 3

City/Town

County/Province/State

Postcode/Zipcode

Country of Residence

Percentage shareholding or beneficial ownership of the applicant

 %

**Director 3**

First Name

Last Name

Date of Birth

Residential Address Line 1

Address Line 2

Address Line 3

City/Town

County/Province/State

Postcode/Zipcode

Country of Residence

Percentage shareholding or beneficial ownership of the applicant

 %

**Director 4**

First Name

Last Name

Date of Birth

Residential Address Line 1

Address Line 2

Address Line 3

City/Town

County/Province/State

Postcode/Zipcode

Country of Residence

Percentage shareholding or beneficial ownership of the applicant

 %

Please note, we need proof of identity and proof of residential address for each beneficial owner and director. (Please see section What to do next)

## WHAT TO DO NEXT

A full application consists of:

- A complete, signed application form with board resolution
- The required corporate documentation
- The required proof of identity and proof of residence for all principal contacts, beneficial owners, directors, and the signatory

These should be scanned and emailed to us at [apply@valbury.co.uk](mailto:apply@valbury.co.uk) Alternatively, they can be posted to us at **Valbury Capital Ltd, 4 Royal Mint Court, London EC3N 4HJ**. We generally ask for copies only, please do not send original documents.

### Corporate Documentation

Please provide a copy of each of the following about the applicant:

- Proof of registered Address
- Documents of Incorporation
- Memorandum and Articles of Association
- Documentation of Ownership Structure
- A copy of the latest report and accounts or annual financial statements, or, balance sheet of income and expenses account for each principal contact, beneficial owner and director.

### Proof of Identity

One valid and unexpired government issued document showing full name and photograph, and date of birth such as:

- Passport (identification and signature page required)
- National Identity Card
- Photo card Driver's Licence
- Government Issued Photo ID

### Proof of Residence

This document needs to be less than 6 months old issued by a government, public sector body or judicial authority which displays the applicant's full name and current address such as the following.

- Bank Statement (We do not accept on-line printed statements)
- Credit Card Statement
- Government Issued Document
- Utility Bill (not a mobile phone bill)

## UNDERSTAND THE RISKS INVOLVED

Before completing your application, please ensure that you have read our Terms of Business, Summary Order Execution Policy, Privacy Policy, Conflict of Interest Policy, Risk Disclosure and if you have any questions do not hesitate to contact us on +44 800 1223 150.

**If we are unable to verify your information we will notify you by email with what is necessary to complete the application.**

## FUNDING YOUR ACCOUNT

Please be aware that your account will not be opened until the funding for the account is in place.

Funding should be sent using the banking instructions below.

Please make sure when sending funds that you have the correct account information.

We accept GBP, EUR, USD. All accounts are held in USD and all funds other than USD will be converted to USD, as a standing instruction from you.

Any funds held with Valbury Capital Ltd are held in segregated accounts unless we have agreed otherwise.

If possible please reference any transfer of these funds with your account name.

### Barclays Banking Instructions

City of London Branch  
60 Queen Victoria Street  
London EC4N 4TR

### Settlement Instructions - GBP

Sort Code: 20-19-90  
Account: 53571424  
BIC/SWIFT Code: BARCGB22  
IBAN: GB77BARC20199053571424

### Settlement Instructions - EUR

Sort code: 20-19-90  
Account: 88843488  
BIC/SWIFT Code: BARCGB22  
IBAN: GB58BARC20199088843488

### Settlement Instructions - USD

Sort code: 20-19-90  
Account: 85207122  
BIC/SWIFT Code: BARCGB22  
IBAN: GB92BARC20199085207122

We are authorised and regulated by the Financial Services Authority, registered number 540418.