



Suite 406, The Linen Hall
 162-168 Regent Street
 London. W1B 5TB
 T: 0203 327 7780
 info@usimoney.com
 usimoney.com

Account Application Form (Corporate)

Client to initial at bottom of each page

Company Details. Section 1

01	Full Name of Company	
02	Contact Name	
03	Company Registration Number	
04	Full Address	
05	Registered Address	
06	Telephone Contact Number(s) Fax Contact Number(s) Mobile Contact Number(s)	
07	Person(s) Authorised to give Instructions	<p>1. Name: Email: Position:</p> <p>Signature:</p> <p>2. Name: Email: Position:</p> <p>Signature:</p> <p>3. Name: Email: Position:</p> <p>Signature:</p>
08	Email Address	
09	Website Address:	
10	Company Directors / Partners	1)



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	and Address	2) 3) 4)
11	Ownership (provide details of firm's controllers – person/entity controlling 10% or more).	
12	Company Bank Account Details:	Name of Bank: Account Name: Sort Code: Account Number: IBAN: SWIFT:
13	Nature of Business	
14	Main purpose of money remittance	
15	Countries covered	
16	Relationship with beneficiaries	
17	How did you hear about USI Money	

Financial Information / Currency Requirements Section 2

18	Projected Average Annual Turnover with USI Money	£
19	Frequency of Remittance per year	
20	Average Single Transaction Size	
21	Average Monthly Transaction Size	
22	Maximum Transaction size	
	Major Currencies Required Specific European Countries (in case of Euros)	

Trading Experience/Compliance Check-list

Section 3

To be completed by an individual given authority over this account

- | | | |
|---|--|---------------------------------------|
| 1. Do you understand the procedure involved in the settlement of your transaction? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 2. Do you understand that failure to meet your contractual obligation to USI Money may incur a financial penalty? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 3. Do you understand the procedure in entering into a forward transaction? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 4. Are you aware of the deposit requirements for forward transactions? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 5. Are you aware that adverse movement in the exchange rate may result in additional deposit being required? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |

General Disclosures

- | | | |
|--|--|---------------------------------------|
| 6. Does your company have any pending litigation, disputes or other unresolved matters with other financial brokers? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 7. Does your company have or ever had any other account(s) with USI Money or any of its affiliates? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 8. Are you aware that USI Money cannot accept third party payments on your behalf? All transfers received MUST originate from an account in the name of the company. | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 9. Have you ever been declared bankrupt or been involved in any insolvency proceedings? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |

Additional Information Sheet



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I/We the undersigned confirm that we have read and understood the Terms & Conditions of USI Money.

I/We also declare that all the information provided in this form is true. Any individuals listed as authorised person/s are authorised to verbally or electronically place foreign exchange orders as well as sign on the company's behalf.

Full Terms and Conditions are attached.

You must immediately notify us of any material changes to this completed form.

<i>Signed By</i>	<i>Signature</i>
<i>Signed By</i>	<i>Signature</i>
<i>Date</i>	

Anti-Money Laundering Checks (ID Checklist) Section 4

Proof of Identity of the Corporation
Evidence of each person who controls the Company or Authorised Persons.
Primary ID Individual - (photo ID) Compulsory <input type="checkbox"/> Original or certified true copy (black and white) of current valid passport or <input type="checkbox"/> Original or certified true copy (black and white) of current valid driving licence
Secondary ID Company - Any two of the following (no more than 3 months old) to establish place of business address <input type="checkbox"/> Original Utility Bill <input type="checkbox"/> Original Credit Card Statement <input type="checkbox"/> Original Bank Statement

Return the completed forms along with any relevant documents to;
 USI Money – Suite 406, The Linen Hall, 162-168 Regent Street, London W1B 5TB

For USI MONEY use only		USIM A/c NO	PW
DATE		DATE	
COMPLETED BY:		VERIFIED BY	
Checked Company Website – Y/N?	Checked Google Map – Y/N?	Client Initialled Each Page – Y/N?	
COMMENTS			