

OTCxpert Personal Account Opening Form

OTCxpert 個人開戶申請表格 (請以英文填寫)

| Section A 甲部 - Company Information 公司資料 | | | |
|--|--|-------------------------|--------------------------|
| Last Name 姓 | | First Name 名 | |
| Mailing Address 通訊地址 | | | |
| Mobile No. 手提電話 | | Email 電郵 | |
| HK Identity Card No. 香港身份證號碼 | | Nationality 國籍 | |
| Passport No. (If Applicable) 護照號碼 (如適用) | | | |
| Section B 乙部 - Contact Information 聯絡資料 | | | |
| Bank Name 登記銀行 | | | |
| Account Name 戶口名稱 | | | |
| Account Number 戶口號碼 | | | |
| Section C 丙部 - Personal Information 個人資料 | | | |
| Occupation 職業 | | Year of Experience 年資 | |
| Funding Source 個人購買數字資產來源 | | | |
| Current OTC Provider 現在選用的 OTC 平台 | | | |
| Previous OTC Provider 曾經選用的 OTC 平台 | | | |
| How do you learn about OCTxpert 你如何得知 OCTxpert | | | |
| Turnover for The Past 3 month 過去 3 個月交易額 | Last Month 最近一個月 | Recent 3 months 最近 3 個月 | |
| | HKD | | |
| Section D 丁部 - Personal Performance Index 個人分析 | | | |
| Completion and Filing Tax Return for 12 months 過去 12 個月內有曾報稅 | <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| Total Income of Last Year 上年年度收入金額 | HKD | 0 - 500,000 | <input type="checkbox"/> |
| | HKD | 500,001 - 800,000 | <input type="checkbox"/> |
| | HKD | 800,001 - 1,000,000 | <input type="checkbox"/> |
| | HKD | Over 1,000,001 | <input type="checkbox"/> |

Application is subject to the approval by OTCxpert.

OTCxpert 保留最終申請審核權。

Please email the application form and the following documents to: trade@otcxpert.com

請將申請表及下列文件電郵至 trade@otcxpert.com

1. Copy of ID / Passport (if applicable) 身份證或護照副本 (如適用) ;
2. Copy of Bank Statement (recent 3 months) 銀行月結單副本 (最近 3 個月) ;
3. Copy of Residential address proof (recent 3 months) 住址證明副本(最近 3 個月) 。

Part II: Declaration by applicant 第三部分 申請者聲明

I hereby confirm that the information provided in this OTCxpert Payment Service Application Form is complete and accurate in all respects. I further hereby undertake and covenant with OTCxpert to notify in writing forthwith of any material(s) change to that information. OTCxpert are authorized to conduct a cross check to verify the information accuracy from time to time. All actions taken by OTCxpert in accordance with such laws, rules, regulations, directions, customs, and usages are under Hong Kong SAR Jurisdiction & shall also be lastly binding on us. I hereby give consent and authorize to disclose above information to any related banks, financial institutions and related companies.

本人在此確認，在 OTCxpert 付款服務申請表中所提供的資料在各方面皆完整及準確。本人再在此承諾並保證，本人將以書面通知 OTCxpert 任何資料的變更。並受權予 OTCxpert 公司進行檢查，以不時核實信息的準確性。OTCxpert 採取的一切行動都按照香港特別行政區司法管轄權的法律法規、指引、習俗、慣例而行，並對我們有最終約束力。本人在此同意並授權給相關的銀行、金融機構和公司公開以上信息。

(In case of discrepancies between the English and Chinese Terms and Conditions, the English version shall prevail.

上述條款及細則之中、英文版本之內容如有歧義，概以英文版本為準。)

Applicant signature
申請者簽署

Name 姓名 _____ Date 日期(DD/MM/YYYY) _____

| For Internal Only | | |
|-------------------|-----------------------------------|-----------------------------------|
| Client ID: | | |
| App Status | <input type="checkbox"/> Approved | <input type="checkbox"/> Rejected |
| Daily Limit | USD: | HKD: |
| Monthly Limit | USD: | HKD: |
| Site Visit | | |
| Staff | Sales / Trader | |