

Individual / Joint Account Opening Form

BOOM SECURITIES (H.K.) LIMITED
Suite 802, AIA Tower, 183 Electric Road, North Point, Hong Kong
SFC Registered Securities Dealer CE No AEF 808



Type of Account (Please tick the appropriate box)

Individual Account: Cash Account / Margin Account

Joint Account: Cash Account / Margin Account

To open your BOOM Trading Account, please

1. **complete and sign** ALL the sections* in this application form, and

2. **attach** the following documents**

- 2.1 A copy of official ID or passport, with signature of witness (if applicable)
- 2.2 A copy of address proof issued within last 3 months (utility bills, bank statements, etc)
- 2.3 Employer consent letter (*see Part 1 & 2*) (if applicable)
- 2.4 For signature verification: Attach a **personal cheque**¹, **OR** **witness**² sign in Part 7c

Note 1: A personal cheque must be (1) issued from your account with a Hong Kong licensed bank, (2) bear your name, (3) signed with the **same signature as in Part 7b**, (4) made payable to "**Boom Securities (H.K.) Limited**", and (5) at a minimum amount of HK\$10,000. If applying for a Joint Account, **each** applicant should attach a cheque bearing his/her signature only.

Note 2: Acceptable witness can be a BOOM employee, Justice of Peace, Notary Public, a financial or legal professional (such as a Bank Manager, Certified Public Accountant, Solicitor). The witness also need to sign and state "Certified True Copy" on your ID/passport copy(ies).

Account Opening Fee of HK\$200 will be debited from your account once it is activated.

*If interested in U.S. stock trading, please complete and sign Part 8 (not applicable for U.S. citizens or residents).

** For joint account application, the second applicant is also required to submit the above documents.

For Official Use Only			
Account Number _____			
Document obtained <input type="checkbox"/> ID/Passport <input type="checkbox"/> Address proof <input type="checkbox"/> Consent letter* <input type="checkbox"/> Personal cheque* <small>* If necessary</small>			
<input type="checkbox"/> Required information and documents are obtained and checked			
<input type="checkbox"/> Client Agreement and Addendum - Margin Agreement (if applicable) have been sent to the Client			
_____		_____	
Handling Staff		Date	
Reviewed by _____		System setup by _____	
_____		_____	
Functional Head		Date	
_____		_____	
Settlement		Date	

PART 1 : First Applicant Personal Information (Primary Account Holder)

Name (Please use block letters) _____	<input type="checkbox"/> Mr.	<input type="checkbox"/> Ms.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Dr.
Surname _____		Given Name _____		
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth _____ Year _____ Month _____ Day _____			
Official ID/ Passport No. _____				
Citizenship _____		Country of Primary Residence _____		
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married				
Education Background <input type="checkbox"/> Postgraduate Degree <input type="checkbox"/> Bachelor/Post-secondary <input type="checkbox"/> Secondary <input type="checkbox"/> Primary				
Home Tel. () _____	Office Tel. () _____			
Mobile Tel. () _____	Email [_____]			
Home Address (P.O. Box not accepted) _____				
City _____		Province _____		
Country _____		Postal/Zip Code _____		
Company Name _____		Position/ Occupation _____		
Industry <input type="checkbox"/> Securities/Finance <input type="checkbox"/> Others _____				
Company Address (P.O. Box not accepted) _____				
City _____		Province _____		
Country _____		Postal/Zip Code _____		
Correspondence Address		<input type="checkbox"/> Home Address		<input type="checkbox"/> Company Address
Are you an employee of a company registered with the Securities and Futures Commission (SFC) of Hong Kong?				
<input type="checkbox"/> No <input type="checkbox"/> Yes. Please provide written consent from your employer.				
Are you a relative of any BOOM employee or Director?				
<input type="checkbox"/> No <input type="checkbox"/> Yes. Please specify Name _____ Relationship _____				

PART 2 : Second Applicant Personal Information (For Joint Account Application Only)

Name (Please use block letters) Mr. Ms. Mrs. Dr.

Surname _____ Given Name _____

Gender Male Female Date of Birth _____ Year _____ Month _____ Day

Official ID/ Passport No. _____

Citizenship _____ Country of Primary Residence _____

Marital Status Single Married

Education Background Postgraduate Degree Bachelor/Post-secondary Secondary Primary

Home Tel. () _____ Office Tel. () _____

Mobile Tel.() _____ Email _____

Home Address (P.O. Box not accepted)

City _____ Province _____

Country _____ Postal/Zip Code _____

Company Name _____ Position/ Occupation _____

Industry Securities/Finance Others _____

Company Address (P.O. Box not accepted)

City _____ Province _____

Country _____ Postal/Zip Code _____

Are you an employee of a company registered with the Securities and Futures Commission (SFC) of Hong Kong?

No Yes. Please provide written consent from your employer.

Are you a relative of any BOOM employee or Director?

No Yes. Please specify Name _____ Relationship _____

PART 3 : Ultimate Beneficiary (Beneficial Owner)

Are you the sole beneficial owner of the BOOM account? Yes No. Please specify below.

Name _____ Official ID / Passport No. _____

Tel. No. () _____ Fax. No. () _____

PART 4 : Bank Information (Name of the Bank Account holder must be the same as on the BOOM account. For a joint bank account, please specify the name of the other account holder as below.)

Bank Name _____ Bank Account Number _____

Other Account Holder's Name (for Joint Bank Account ONLY) _____

Initial Deposit by cheque Currency _____ Amount _____

PART 5 : Communication Instruction

Which language do you prefer to be communicated in? English / Chinese

Account Notifications (include trade confirmations and corporate action notices) will be sent to you via email only.

Delivery of Transaction Record * - send to the email OR correspondence address as indicated in Part 1

Daily Activity Statements Send by email / Send by post

Monthly Activity Statements Send by email / Send by post (**Handling Fee HKD 10**)

** For Joint Trading Account, it will be sent to first applicant only.*

Transaction Record Daily (also serves as trading confirmations and contract notes) / Monthly Activity Statements can be accessed online at BOOM > My Account > Account History > Statement (Daily / Monthly).

Where did you hear about BOOM?

Search Engines [Google / Yahoo / MSN / Others, please specify _____]

Web [BOOM Website / Other Website, please specify _____]

Media [Newspaper / Magazine / TV/Radio / Seminar / MTR/Bus/Billboard]

Referrals [Referred by Friends / Referred by BOOM member, member's name _____]

PART 6 : Investment Profile

In order to better understand your need and in serving you, please provide us with the following information.

Investment Objective Capital Preservation – Low Risk / Return Controlled Growth – Moderate Risk / Return
 Speculative/Short-term – High Risk / Return Combination of Moderate to High Return

Investment Knowledge None Fair Good Extensive

Investment Experience None Fair Good Extensive

Type of Investments Equity Equity Warrants Equity Options Foreign Exchange
You Have Foreign Exchange Options Corporate Bonds Government Bonds
 Mutual Funds Index Options

Annual Income (HK\$) Under \$200,000 \$200,000 – \$399,999 \$400,000 – \$789,999
 \$790,000 – \$3,949,999 \$3,950,000 or above

Liquid Net Worth (HK\$) ... Under \$500,000 \$500,000 – \$999,999 \$1,000,000 – \$1,999,999
 \$2,000,000– \$3,999,999 \$4,000,000 - \$7,999,999 \$8,000,000 or above*

* If selected, BOOM may send you information regarding offers of securities exclusive for Professional Investors.

For Official Use Only: Declaration by Staff (a Licensed or Registered Person)

I, the undersigned, confirm that the **Risk Disclosure Statements** in **Clause 42** of the **Client Agreement** and **Clause 14** of the **Addendum – Margin Agreement** (*margin application only*) have been provided to the client in a language of one's choice, and the client was invited to read and ask questions and to take independent advice, if the client so wishes.

X _____
Signature of Staff Name of Staff (in block letters) CE No. (in block letters) Date

PART 7 : Declaration of Client

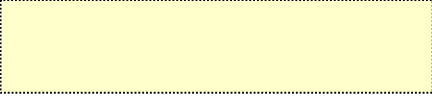
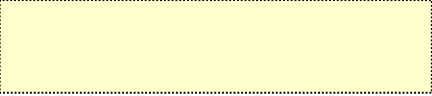
Part 7a : For Joint Account Application (For Joint Account Application Only)

Each of the joint account holders specified is authorized to give verbal instructions and/or instructions to BOOM in relation to the purchase or sale of any securities for the Account from time to time.

Signing Arrangement: For validation on any written instructions relating to the operation of the Account, each of the joint account holders hereby agree that **Either** one of the account holders sign singly, **or** **Both** account holders sign jointly

Ownership by 2 or More Persons: When an account is opened in joint names, each individual hereby declares that the account is held by us as **A - Joint Tenants with Right of Survivorship** **or** **B - Tenants in Common.** (Please specify the Percentage) _____

I/We, the undersigned, have read and fully understood the attached provisions of **Joint Account** in the **Client Agreement**, and accept and agree to be bound by the same in full as it may be amended from time to time.

Sign Here ▶  
Signature of **First Applicant** (Joint Account Holder) Date _____ Signature of **Second Applicant** (Joint Account Holder) Date _____

Part 7b : Client Declaration (For BOTH Individual and Joint Account Application)

I/We, the undersigned, declare and represent that I/We have examined the information as provided by me/us on this form are true, correct and complete and that the representations made by me/us are accurate. I/We agree that all personal data provided in this application form may be used by the company in connection with verification/administration procedures, or disclosed for any other purposes as defined in the Personal Data (Privacy) Ordinance. I/We understand that, I/We may arrange to be excluded from any of the company's future promotional mailings, at any time and without charges, by giving notification in writing to the company.

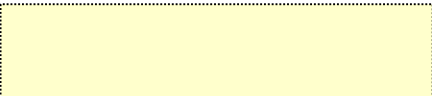
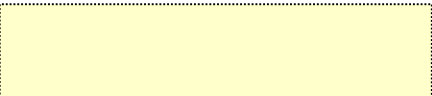
(Please **CHOOSE** the account type you are applying and **CROSS OUT** the non-applicable declaration)

For Cash Account Application

I/We, the undersigned, have read, have been explained when requested, and fully understood the attached provisions of **Client Agreement** and Supplement to the Client Agreement – Interest Schedule. The **Risk Disclosure Statements** in **Clause 42** of the **Client Agreement** were provided in a language of my/our choice (English or Chinese) and I/we were invited to read, to ask questions and take independent advice if I/we wish. I/We accept and agree to be bound by the Client Agreement in full as it may be amended from time to time.

For Margin Account Application

I/We, the undersigned, have read, have been explained when requested, and fully understood the attached provisions of **Client Agreement, Addendum – Margin Agreement**, and Supplement to the Client Agreement – Interest Schedule. The **Risk Disclosure Statements** in **Clause 42** of the **Client Agreement** and **Clause 14** of the **Addendum – Margin Agreement** were provided in a language of my/our choice (English or Chinese) and I/we were invited to read, to ask questions and take independent advice if I/we wish. I/We accept and agree to be bound by the Client Agreement and Addendum – Margin Agreement in full as it may be amended from time to time.

Sign Here ▶  
Signature of **First Applicant** Date _____ Signature of **Second Applicant** Date _____

Part 7c : Witness (For requirement of witness, refer to Point 2.4 on Page 1)

X _____
Signature of **Witness*** Name of **Witness** Occupation of **Witness** Date _____

* Witness please also sign and write "Certified True Copy" on applicant's ID/passport copy.

Your Member ID and Login Password will be sent to you via email upon finalization of your application. Your Key Code will be sent to you by post following this. Thank you for your interest in BOOM.

(If there is inconsistency between the English and Chinese version of this Account Opening Form, the English version shall prevail.)

PART 8 : W-8BEN Form (For U.S. stock trading only, not applicable for U.S. citizens or residents)

Form **W-8BEN**
(Rev. February 2006)
Department of the Treasury
Internal Revenue Service

**Certificate of Foreign Status of Beneficial Owner
for United States Tax Withholding**

OMB No. 1545-1621

▶ Section references are to the Internal Revenue Code. ▶ See separate instructions.
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

Do not use this form for:
• A U.S. citizen or other U.S. person, including a resident alien individualW-9
• A person claiming that income is effectively connected with the conduct of a trade or business in the United StatesW-8ECI
• A foreign partnership, a foreign simple trust, or a foreign grantor trust (see instructions for exceptions)W-8ECI or W-8IMY
• A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession that received effectively connected income or that is claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) (see instructions)W-8ECI or W-8EXP
Note: These entities should use Form W-8BEN if they are claiming treaty benefits or are providing the form only to claim they are a foreign person exempt from backup withholding.
• A person acting as an intermediaryW-8IMY
Note: See instructions for additional exceptions.

Part I Identification of Beneficial Owner (See instructions)

1 Name of individual or organization that is the beneficial owner 2 Country of incorporation or organization
3 Type of beneficial owner: Individual Corporation Disregarded entity Partnership Simple trust
 Grantor trust Complex trust Estate Government International organization
 Central bank of issue Tax-exempt organization Private foundation
4 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.
City or town, state or province. Include postal code where appropriate. Country (do not abbreviate)
5 Mailing address (if different from above)
City or town, state or province. Include postal code where appropriate. Country (do not abbreviate)
6 U.S. taxpayer identification number, if required (see instructions) SSN or ITIN EIN 7 Foreign tax identifying number, if any (optional)
8 Reference number(s) (see instructions)

Part II Claim of Tax Treaty Benefits (If applicable)

9 I certify that (check all that apply):
a The beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.
b If required, the U.S. taxpayer identification number is stated on line 6 (see instructions).
c The beneficial owner is not an individual, derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits (see instructions).
d The beneficial owner is not an individual, is claiming treaty benefits for dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation, and meets qualified resident status (see instructions).
e The beneficial owner is related to the person obligated to pay the income within the meaning of section 267(b) or 707(b), and will file Form 8833 if the amount subject to withholding received during a calendar year exceeds, in the aggregate, \$500,000.
10 **Special rates and conditions** (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 9a above to claim a _____ % rate of withholding on (specify type of income): _____ Explain the reasons the beneficial owner meets the terms of the treaty article, _____

Part III Notional Principal Contracts

11 I have provided or will provide a statement that identifies those notional principal contracts from which the income is **not** effectively connected with the conduct of a trade or business in the United States. I agree to update this statement as required.

Part IV Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:
1 I am the beneficial owner (or am authorized to sign for the beneficial owner) of all the income to which this form relates,
2 The beneficial owner is not a U.S. person,
3 The income to which this form relates is (a) not effectively connected with the conduct of a trade or business in the United States, (b) effectively connected but is not subject to tax under an income tax treaty, or (c) the partner's share of a partnership's effectively connected income, **and**
4 For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions. Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner.

Sign Here ▶ _____
Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-DD-YYYY) Capacity in which acting

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 25047Z

Form **W-8BEN** (Rev. 2-2006)