



## **APPENDICES**

**APPLICABLE TO CUSTOMER TRADING  
AGREEMENT**

**Appendix No 1**  
**Applicable to Customer Trading Agreement No \_\_\_\_\_**

<b>I. CLIENT INFORMATION</b>	
1. Full name	
2. Date of Birth	3. Place of Birth
4. Citizenship	5. Passport/ID Card No
6. Date of Issue	7. Date of Expiry
8. Address:	
9. Zip code	10. City
11. State	12. Country
13. Marital status:	
14. Telephone number	
15. Mobile number	
<b>II. INFORMATION DISTRIBUTION METHODS</b>	
Post:	
E-mail:	
Fax:	
<b>III. ASSESSMENT FOR AN APPROPRIATE SERVICE</b>	
<input type="checkbox"/> I declare that I refuse to provide in part or in full the information requested by DELTASTOCK regarding my education, occupation, financial status, and trading knowledge and experience. I am informed that my refusal will lead to the inability of DELTASTOCK to fulfill its obligation to make an assessment for an appropriate service.	
<input type="checkbox"/> I am informed that DELTASTOCK will periodically request an update of the information provided in this Appendix that shall be sent to the address, e-mail or fax number stated under Section II. above.	
<input type="checkbox"/> I refuse to update the information requested by DELTASTOCK regarding my education, occupation, financial status and trading knowledge and experience.	
Declarant: _____ <small>(signature)</small>	
<b>1. EDUCATION</b>	
1. Education <input type="checkbox"/> Elementary <input type="checkbox"/> High School <input type="checkbox"/> University <input type="checkbox"/> Other _____	
2. Type of education	
3. Occupation	
4. Nature of business	
<b>2. INVESTMENT TARGETS</b>	
What are your investment targets?	
- speculation	<input type="checkbox"/>
- hedging	<input type="checkbox"/>
<b>3. FINANCIAL DETAILS</b>	
1. Total annual income (USD):	
2. Approximate value of your risk capital (USD), the loss of which should not adversely affect your own and family lifestyle:	

3. Sources of income (%)	
- Salary	_____ %
- Premiums and/or bonuses to a salary	_____ %
- Rent	_____ %
- Interests and/or dividends from investments	_____ %
- Other: _____ (please specify)	_____ %

#### 4. EXPERIENCE WITH TRADING FINANCIAL INSTRUMENTS

Stocks and/or Bonds	<input type="checkbox"/> none	<input type="checkbox"/> less than 1 year
	<input type="checkbox"/> from 1 to 3 years	<input type="checkbox"/> over 3 years
Spot and Forward trades with Currency pairs (Forex), Currency options	<input type="checkbox"/> none	<input type="checkbox"/> less than 1 year
	<input type="checkbox"/> from 1 to 3 years	<input type="checkbox"/> over 3 years
Contracts for differences (CFDs) on securities, indices and futures	<input type="checkbox"/> none	<input type="checkbox"/> less than 1 year
	<input type="checkbox"/> from 1 to 3 years	<input type="checkbox"/> over 3 years
Other derivative instruments	<input type="checkbox"/> none	<input type="checkbox"/> less than 1 year
	<input type="checkbox"/> from 1 to 3 years	<input type="checkbox"/> over 3 years
Group Investment Schemes	<input type="checkbox"/> none	<input type="checkbox"/> less than 1 year
	<input type="checkbox"/> from 1 to 3 years	<input type="checkbox"/> over 3 years
Other	<input type="checkbox"/> none	<input type="checkbox"/> less than 1 year
	<input type="checkbox"/> from 1 to 3 years	<input type="checkbox"/> over 3 years
Approximate number of transactions per month:		
Average amount of money involved in one transaction (USD):		

**To be completed by an employee of DELTASTOCK:**

According to the information provided in Section III and based on the assessment of DELTASTOCK, I am informed that the service I apply for:

is appropriate for me

is not appropriate for me

lacks sufficient information

cannot be assessed

**By completing and signing this Appendix:**

1. I am informed and I hereby accept and agree to be classified by DELTASTOCK as retail client.
2. I am informed that I have the right to request a change in my classification to a “professional client” status, as well as that any such change will result in a lower level of protection.
3. I am informed and agree with all of DELTASTOCK’s policies and procedures regarding the classification of professional clients.
4.  I do wish /  I do not wish to be classified as a “professional client”.
5. I am aware of my responsibility to inform DELTASTOCK for any changes in the information provided herein, which have an effect in my classification as a non-professional or professional client.

Date \_\_\_\_\_  
(dd/mm/yyyy)

Declarant: \_\_\_\_\_  
(signature)

## Appendix No 2

Applicable to Customer Trading Agreement No \_\_\_\_\_

### SPECIFICATIONS OF THE CLIENT'S ACCOUNT

I the undersigned \_\_\_\_\_  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

**1. I choose the following base currency for my account:**

- |                              |                              |
|------------------------------|------------------------------|
| <input type="checkbox"/> USD | <input type="checkbox"/> JPY |
| <input type="checkbox"/> EUR | <input type="checkbox"/> BGN |
| <input type="checkbox"/> GBP | <input type="checkbox"/> RON |
| <input type="checkbox"/> CHF |                              |

**2. I wish to set (change) the margin on Forex trading to \*:**

\_\_\_\_\_ % ( \_\_\_\_\_ percent)  
*in numbers* *in words*

\* **The margin percentage for Forex trading may range between 0.50 % and 100.00 %, and should be a multiple of 0.50 %. For example: 0.50 %; 1.00 %; 1.50 %; 2.00 %; 2.50 % etc.**

Date \_\_\_\_\_  
(dd/mm/yyyy)

Declarant: \_\_\_\_\_  
(signature)

## Appendix No 3

Applicable to Customer Trading Agreement No \_\_\_\_\_

### DECLARATION

*under Art. 4, para. 7 and Art. 6, Art. 5, para 3 of MAMLA*

I the undersigned \_\_\_\_\_  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

#### DECLARE THAT:

1. If during the execution of the Customer Trading Agreement No \_\_\_\_\_ from \_\_\_\_\_ there are any changes and/or amendments of the identification documents, I will promptly notify DELTASTOCK within a period of **seven days** and will provide the relevant documents to record the changes.
2. Under this declaration “changes of identification documents” will take into account changes and/or amendments that happened after the above mentioned Agreement has been signed, for the following data:
  - **for retail clients** – personal identity documents and permanent address;
  - **for legal entities** – company name and address, business activity, persons representing and managing the company, register number, tax number.
3. The amount of my initial deposit will be:

\_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_,  
*in numbers* *in words* *currency*

The funds I will deposit have the following source:

\_\_\_\_\_

*I am aware that a false declaration could render me liable to prosecution under the Bulgarian legislation.*

Date \_\_\_\_\_  
(dd/mm/yyyy)

Declarant: \_\_\_\_\_  
(signature)

## Appendix No 4

Applicable to Customer Trading Agreement No \_\_\_\_\_

# DECLARATION

*for a Politically Exposed Person and its related persons*

I the undersigned \_\_\_\_\_  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

### HEREBY DECLARE THAT:

1.  I am not /  I am a person under Art. 5a of MAMLA, in connection with Art. 8a of RIMAMLA, including:
  - head of state, head of government, minister or deputy minister;
  - member of parliament;
  - member of a constitutional court, a supreme court or other high-level judicial body whose decisions are not subject to further appeal other than in exceptional circumstances;
  - member of a court of auditors;
  - member of the management board of a central bank;
  - ambassador or chargé d'affaires;
  - high-ranking officer in the armed forces;
  - member of the administrative, management or supervisory body of a state-owned enterprise;
  - mayor or deputy mayor of a municipality, mayor or deputy mayor of a region, or chairperson of a municipal council;
  - mid-level official or lower-level official.
2.  I am not /  I am a person related to a person within the scope of the preceding item, "related persons" being:
  - spouses or persons living in a non-marital cohabitation;
  - first-level descendants and their spouses or persons they live with in a non-marital cohabitation;
  - first-level ascendants;
  - any individual, who is known, or who can be assumed on the basis of publicly available information, to be the actual owner together with a person under Art. 2 of a legal entity, or has other close commercial, professional, or other business relations with a person under Art. 2;
  - any individual, who is the sole owner or actual owner of a legal entity, which is known, or which can be assumed on the basis of publicly available information, to have been established for the benefit of a person under Art. 2.
3. I am aware that in the event of a change in the above circumstances I must immediately submit a new declaration.
4. I am aware that a false declaration could render me liable to prosecution under the Bulgarian legislation.

Date \_\_\_\_\_  
(dd/mm/yyyy)

Declarant: \_\_\_\_\_  
(signature)

**Appendix No 5**  
**Applicable to Customer Trading Agreement No \_\_\_\_\_**

**DECLARATION**

*under Art. 6, para. 2 of MAMLA*

The undersigned \_\_\_\_\_  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

in my capacity of legal representative (proxy) of: \_\_\_\_\_  
\_\_\_\_\_  
entered into the register with \_\_\_\_\_

hereby declare that the beneficial owner within the meaning of Art. 6, Para. 2 of MAMLA in connection with Art. 3, Para. 5 of RIMAMLA of the aforementioned legal person is/are the following natural person(s):

1. \_\_\_\_\_  
*(first name, surname, family name)*  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

2. \_\_\_\_\_  
*(first name, surname, family name)*  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

3. \_\_\_\_\_  
*(first name, surname, family name)*  
Date of Birth \_\_\_\_\_, Place of Birth \_\_\_\_\_, Citizenship \_\_\_\_\_,  
Passport/ID Card No \_\_\_\_\_, Date of Issue \_\_\_\_\_, Date of Expiry \_\_\_\_\_,  
Address \_\_\_\_\_,  
Zip code \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_,  
Country \_\_\_\_\_

Date \_\_\_\_\_  
*(dd/mm/yyyy)*

Declarant: \_\_\_\_\_  
*(signature)*



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