

4AX AUTHORISED USER APPLICATION

April 2020



[TRANSPOSE ONTO APPLICANT'S LETTERHEAD]

[Please note: all the following requirements form part of the application to the 4AX Compliance Committee for admission as an authorised user in terms of the 4AX Exchange Rules, and that the 4AX Compliance Committee may request additional information to assess the application.]

The Compliance Committee
4 Africa Exchange Proprietary Limited
Hill on Empire, 4th Floor, Building A
16 Empire Road, Parktown
2193
South Africa

[INSERT DATE]

4AX AUTHORISED USER APPLICATION

SECTION A: CEO DECLARATION

I, (Full Name), as Chief Executive Officer ("CEO") of (Applicant's Full Legal Name) ("Applicant") submit this application to become an authorised user of 4 Africa Exchange Proprietary Limited (registration number 2013/031754/07) ("4AX") and confirm the following:

- A. I am authorised to make this application and have the necessary consents from all the individuals referred to in this application to provide their information, as provided herein, and to use their information as if they are the applicants themselves;
- B. The information contained in this application is true and correct, current, complete and not misleading in terms of the 4AX Exchange Rules;
- C. The prescribed application fee will be paid on presentation of an invoice by 4AX;
- D. Should the Applicant become an authorised user, the Applicant will continue to meet its obligations and be regulated in terms of the 4AX Exchange Rules, for so long as the Applicant is an authorised user of 4AX;
- E. For as long as I continue to be CEO of the Applicant, I will notify 4AX of any material changes to, or changes affecting the completeness or accuracy of the information in this application as soon as possible, but in no event later than 15 days from the day that the change comes to my attention;
- F. 4AX is hereby authorised to request or confirm any information provided in this application or any other information in support of this application with any other party, including but not limited to the Financial Sector Conduct Authority ("FSCA"), the South African Police Services, industry bodies, and or credit bureau. Credential information includes but is not limited to educational qualifications, professional memberships, employment history, credit and criminal records;
- G. Holders of any information needed to be verified to support this application are hereby authorised to



furnish such information to 4AX and 4AX is indemnified against any liability that may result from furnishing information in this regard; and

- H. The Applicant will use the bank account listed in requirement 1.18 below for all its dealings with 4AX, until it has notified 4AX otherwise and 4AX has acknowledged the change.

.....
CEO's Full Name

.....
CEO's Signature

SECTION B: APPLICANT INFORMATION

1. APPLICANT'S GENERAL DETAILS		
1.1.	Full Legal Name	
1.2.	Abbreviated / short name	
1.3.	Any other name under which business is or has been conducted	
1.4.	Registration Number (Please provide a copy of the CIPC certificate of incorporation)	
1.5.	Email Addresses	
1.6.	Registered Address	
1.7.	Physical Address	
1.8.	Postal Address	
1.9.	Website	
1.10.	Telephone Number	
1.11.	FSCA Licence Numbers (Please provide copies of all licences and conditions attached to them)	
1.12.	Income Tax Number (Please provide a current tax clearance certificate)	
1.13.	VAT Number (Please provide a current tax clearance certificate)	
1.14.	BEE Status (attached latest BEE rating)	
1.15.	Please provide details of all and any licences in the financial sector in South Africa or elsewhere that have been applied for but declined, lapsed or been revoked	
1.16.	Please provide details of all enquiries, investigations or disciplinary action taken by a regulator, other than of a purely administrative nature	
1.17.	Please provide details of all and any exchanges that the Applicant is an authorised user of or intends to be an authorised user of	
1.18.	Please provide the details of the Applicant's account with a bank	Account Number: Account Holder:

	licenced under the Banks Act (please provide confirmation from the bank of these details)	Bank: Branch:
1.19.	Name, physical, postal and email addresses and telephone numbers of the Applicant's auditor and engagement partner	
1.20.	Name, physical, postal and email addresses and telephone numbers of the Compliance Officer of the Applicant.	
1.21.	Details of any insolvency proceedings or arrangements made with creditors	
1.22.	Please attach the Applicant's latest audited annual financial statements	
1.23.	Name, email addresses and telephone numbers of the Applicant's accounting officer/s for billing / invoicing matters	
2. APPLICANT SHAREHOLDER DETAILS		
<i>(Please complete the below for each shareholder holding 5% or more of the equity or voting rights in the Applicant)</i>		
2.1.	Full Legal Name	
2.2.	Registration / Identity Number	
2.3.	Registered Address	
2.4.	Associated companies (As defined in section 67 of the FMA)	
2.5.	Shareholding	Number of shares: Percentage holding:
2.6.	Shareholder Representative on Applicant's Controlling Body, if any	
2.7.	Please list all beneficial owners holding more than an effective 25% interest in the Applicant's shareholder	
2.8.	Please provide details of all and any licences in the financial sector in South Africa or elsewhere that have been applied for but declined, lapsed or been revoked	
2.9.	Please provide details of all enquiries, investigations or disciplinary action taken by a regulator, other than of a purely administrative nature	
2.10.	Please provide details of all and any exchanges the Applicant's	

	shareholder is an authorised user of or intends to be an authorised user of	
2.11.	Details of any insolvency proceedings or arrangements made with creditors	

3. CONTROLLING BODY / BOARD MEMBERS <i>(Please complete the below for each director)</i>		
3.1.	Full name	
3.2.	All previous names	
3.3.	Citizenship	
3.4.	Date of birth	
3.5.	Identity Number (please provide a copy of identification document)	
3.6.	Email Address	
3.7.	Physical Address	
3.8.	Postal Address	
3.9.	Cellphone Number	
3.10.	Date of appointment to the controlling body	
3.11.	Please provide a list of all other directorships held	
3.12.	If a member of the South African Institute of Stockbrokers, please provide membership details	Membership Number: Date admitted as a member:
3.13.	Please provide details of all enquiries, investigations or disciplinary action taken by a regulator, other than of a purely administrative nature	
3.14.	Details of any insolvency proceedings or arrangements made with creditors	

4. AUTHORISED USER PRIMARY REPRESENTATIVE		
4.1.	Full name	
4.2.	All previous names	
4.3.	Citizenship	
4.4.	Date of birth	

4.5.	Identity Number (please provide copy of the identification document)	
4.6.	Email Address	
4.7.	Physical Address (please provide proof of address)	
4.8.	Postal Address	
4.9.	Cellphone Number	
4.10.	Tertiary qualifications obtained (please provide copies of all certificates)	Degree: Institution: Date:
4.11.	If member of a professional body, please provide membership details	Body's Name: Membership Number: Date admitted as a member:
4.12.	If a member of the South African Institute of Stockbrokers, please provide membership details	Membership Number: Date admitted as a member:
4.13.	If registered with the FSCA for any reason, please provide details	
4.14.	Please provide details of all enquiries, investigations or disciplinary action taken by a professional body or regulator, other than of a purely administrative nature	
4.15.	Please provide details of all stock broking experience	Firm: Position: Term:
4.16.	Details of any criminal conviction in South Africa or elsewhere	
4.17.	Details of any insolvency proceedings or arrangements made with creditors	

5. ADDITIONAL AUTHORISED USER REPRESENTATIVE (please complete for each representative)		
5.1.	Full name	
5.2.	All previous names	
5.3.	Citizenship	
5.4.	Date of birth	
5.5.	Identity Number (please provide copy of identification document)	
5.6.	Email Address	

5.7.	Physical Address	
5.8.	Postal Address (please provide proof of address)	
5.9.	Cellphone Number	
5.10.	Tertiary qualifications obtained (please provide copies of all certificates)	Degree: Institution: Date:
5.11.	If a member of a professional body, please provide membership details	Body's Name: Membership Number: Date admitted as a member:
5.12.	If a member of the South African Institute of Stockbrokers, please provide membership details	Membership Number: Date admitted as a member:
5.13.	If registered with the FSCA for any reason, please provide details	
5.14.	Please provide details of all enquiries, investigations or disciplinary action taken by a professional body or regulator, other than of a purely administrative nature	
5.15.	Please provide details of all stock broking experience	Firm: Position: Term:
5.16.	Details of any criminal conviction in South Africa or elsewhere	
5.17.	Details of any insolvency proceedings or arrangements made with creditors	

6. ADDITIONAL INFORMATION REQUIRED		
6.1.	Please provide details of the Applicant's systems to record all trading activities and to interface with 4AX	
6.2.	Please provide details of how the Applicant will supervise its representatives and all 4AX trading	
6.3.	Please provide internal controls of the Applicant to control access to data, to protect the integrity and confidentiality of data	
6.4.	Please provide details of internal systems and controls to protect against loss of data	



6.5.	Please provide details of internal processes to immediately report suspected or actual breaches of the 4AX Exchange Rules to 4AX	
6.6.	Please provide of Applicant's organisational capabilities to monitor the conduct of the representatives and other employees and communications with other 4AX authorised users, clients and 4AX	
6.7.	Please provide a copy of the Applicant's latest management accounts	



SECTION C: INDIVIDUAL DECLARATIONS

(To be completed by each director and representative)

I, (Full Name) as (Title) of (Applicant's Full Legal Name) ("Applicant") submit this application to become an authorised user of 4AX and confirm the following:

- A. The information contained in this application is true and correct, current, complete and not misleading in terms of the 4AX Exchange Rules;
- B. I have read and understand the 4AX Exchange Rules and understand my obligations in terms of them and acknowledge that it incumbent on me to keep my knowledge of the 4AX Exchange Rules current. I acknowledge and agree that I may be disciplined, including being subjected to fines and penalties in terms of the 4AX Exchange Rules;
- C. Will notify 4AX of any material changes to, or changes affecting the completeness or accuracy of my information in this application as soon as possible, but in no event later than 15 days from the day that the change comes to my attention;
- D. 4AX is hereby authorised to request or confirm any information provided in this application or any other information in support of this application with any other party, including but not limited to the Financial Sector Conduct Authority ("FSCA), the South African Police Services, industry bodies, and or credit bureaux. Credential information includes but is not limited to educational qualifications, professional memberships, employment history, credit and criminal records;
- E. Holders of any information needed to be verified to support this application are hereby authorised to furnish information to 4AX and 4AX is indemnified against any liability that may result from furnishing information in this regard; and
- F. I confirm that, other than as disclosed in the application, I have not been convicted of any crime, been disciplined by any regulatory or professional body or been subject to any insolvency proceeding or made any arrangement with any of my creditors.

.....
Full Name

.....
Signature

.....
Date