



## ACCOUNT OPENING CHECKLIST - INDIVIDUAL

### INDIVIDUAL ACCOUNTS

- Completed Customer Information Form – (“CIF”)**
- Master Retail Repurchase Agreement**
- Source of Funds (Client Investment Form)**
- Fax and Email Instructions Authorization and Indemnity Form** (where applicable)
- Copy of valid identification for each accountholder** (Drivers License, Passport or National Identification Card)
- Tax ID Number for each accountholder** (TIN, SSN, TRN where applicable)
- Self-Certification Form**
- Two Character Reference Forms for each accountholder**
- Verification of address for each accountholder** (Drivers Licence; Voters ID; utility bill; credit card or bank statement (no more than 3 months old); property tax receipt duly stamped by the Tax Collectorate (no more than 6 months old)).
- Risk Questionnaire**

### ADDITIONAL PRODUCT SPECIFIC DOCUMENTS

In addition to the account opening documents clients may be required to provide us with additional information for some of the products that are available through our firm. These include:

#### CI Mutual Funds

- CI Mutual Fund Application Form**
- Mutual Fund Declaration Form**
- CI Web Login Request Form** – where access is required by the client to view their CI account online.

#### JNFM Tax Free Account

- LSA Declaration Form**

#### JN Mutual Funds

- Subscription Form**



## 1 ACCOUNT INFORMATION

<b>Online Account Access Required?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Hold Mail</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	By choosing "Yes", I agree that JN Fund Managers will hold my correspondence for 90 Days. Thereafter JNFM is authorised to mail all correspondence to me.
<b>Frequency of Statement</b> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/>	<b>Account Type:</b> <input type="checkbox"/> JN Group Director / Staff <input type="checkbox"/> Immediate Relative of JNFM Staff	

**Kindly complete all sections of this form.**

## 2 INDIVIDUAL ACCOUNT HOLDER(S) INFORMATION

<b>ACCOUNT HOLDER (A)</b> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Other <input type="checkbox"/>	New Client? Yes <input type="checkbox"/> No <input type="checkbox"/> Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>	<b>Dependents Information</b> Number ____ Age(s) _____ Gender _____
First Name _____	Middle Name _____	Last Name _____
Home Address Street _____	Town/City _____	Mailing Address (if Different) Street _____
Parish/State _____	Post/Zip Code _____	Country _____
Tax Identifying Number (TIN) _____	TRN / SSN _____	ID Type _____
Residency _____	Nationality _____	ID Number _____
Primary Email Address _____	Country of Birth _____	Date of Birth (dd/mm/yyyy) _____
Secondary Email Address _____	Are you a US Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are You a Green Card Holder? Yes <input type="checkbox"/> No <input type="checkbox"/>
Occupation / Profession _____	Have you spent 6 or more months in the US within the last 3 years? Yes <input type="checkbox"/> No <input type="checkbox"/>	Self-Certification Form? Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer _____	(____) _____ - _____	(____) _____ - _____
Employer Address Street _____	Town/City _____	Phone (Home) _____
Parish/State _____	Post/Zip Code _____	Country _____
Are you a Director or Senior Officer of a publicly traded company? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, name(s) of company(ies) _____	
Are you individually, or as a part of a group, a majority shareholder in a publicly traded company? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, name(s) of company(ies) _____	
Are you individually, or as a part of a group, the substantial owner / shareholder of a US Foreign Entity? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, name(s) and address of entity(ies) _____	
Interests / Hobbies _____		

<b>ACCOUNT HOLDER (B)</b> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Other <input type="checkbox"/>	New Client? Yes <input type="checkbox"/> No <input type="checkbox"/> Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>	<b>Dependents Information</b> Number ____ Age(s) _____ Gender _____
First Name _____	Middle Name _____	Last Name _____
Home Address Street _____	Town/City _____	Mailing Address (if Different) Street _____
Parish/State _____	Post/Zip Code _____	Country _____
Tax Identifying Number (TIN) _____	TRN / SSN _____	ID Type _____
Residency _____	Nationality _____	ID Number _____
Primary Email Address _____	Country of Birth _____	Date of Birth (dd/mm/yyyy) _____
Secondary Email Address _____	Are you a US Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are You a Green Card Holder? Yes <input type="checkbox"/> No <input type="checkbox"/>
Occupation / Profession _____	Have you spent 6 or more months in the US within the last 3 years? Yes <input type="checkbox"/> No <input type="checkbox"/>	Self-Certification Form? Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer _____	(____) _____ - _____	(____) _____ - _____
Employer Address Street _____	Town/City _____	Phone (Home) _____
Parish/State _____	Post/Zip Code _____	Country _____
Are you a Director or Senior Officer of a publicly traded company? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, name(s) of company(ies) _____	
Are you individually, or as a part of a group, a majority shareholder in a publicly traded company? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, name(s) of company(ies) _____	
Are you individually, or as a part of a group, the substantial owner / shareholder of a US Foreign Entity? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, name(s) and address of entity(ies) _____	
Interests / Hobbies _____		

**ACCOUNT HOLDER (C)**New Client? Yes  No Mr.  Miss  Ms.  Mrs.  Other \_\_\_\_\_Marital Status: Single  Married  Divorced  Widowed **Dependents Information**

Number \_\_\_\_\_ Age(s) \_\_\_\_\_

Gender \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

Home Address Street \_\_\_\_\_

Town/City \_\_\_\_\_

Mailing Address (if Different) Street \_\_\_\_\_

Town/City \_\_\_\_\_

Parish/State \_\_\_\_\_

Post/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Parish/State \_\_\_\_\_

Post/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Tax Identifying Number (TIN) \_\_\_\_\_

TRN / SSN \_\_\_\_\_

ID Type \_\_\_\_\_

ID Number \_\_\_\_\_

Residency \_\_\_\_\_

Nationality \_\_\_\_\_

Country of Birth \_\_\_\_\_

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

Primary Email Address \_\_\_\_\_

Are you a US Citizen? Yes  No 

Secondary Email Address \_\_\_\_\_

Are You a Green Card Holder? Yes  No 

Occupation / Profession \_\_\_\_\_

Have you spent 6 or more months in the US within the last 3 years? Yes  No 

Employer \_\_\_\_\_

Self-Certification Form? Yes  No 

Employer Address Street \_\_\_\_\_

Town/City \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Phone (Home) \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Cellular \_\_\_\_\_

Parish/State \_\_\_\_\_

Post/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Phone (Work) \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Cellular \_\_\_\_\_

Are you a Director or Senior Officer of a publicly traded company? Yes  No 

If yes, name(s) of company(ies) \_\_\_\_\_

Are you individually, or as a part of a group, a majority shareholder in a publicly traded company? Yes  No 

If yes, name(s) of company(ies) \_\_\_\_\_

Are you individually, or as a part of a group, the substantial owner / shareholder of a US Foreign Entity? Yes  No 

If yes, name(s) and address of entity(ies) \_\_\_\_\_

Interests / Hobbies \_\_\_\_\_

**ACCOUNT HOLDER (D)**New Client? Yes  No Mr.  Miss  Ms.  Mrs.  Other \_\_\_\_\_Marital Status: Single  Married  Divorced  Widowed **Dependents Information**

Number \_\_\_\_\_ Age(s) \_\_\_\_\_

Gender \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

Home Address Street \_\_\_\_\_

Town/City \_\_\_\_\_

Mailing Address (if Different) Street \_\_\_\_\_

Town/City \_\_\_\_\_

Parish/State \_\_\_\_\_

Post/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Parish/State \_\_\_\_\_

Post/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Tax Identifying Number (TIN) \_\_\_\_\_

TRN / SSN \_\_\_\_\_

ID Type \_\_\_\_\_

ID Number \_\_\_\_\_

Residency \_\_\_\_\_

Nationality \_\_\_\_\_

Country of Birth \_\_\_\_\_

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

Primary Email Address \_\_\_\_\_

Are you a US Citizen? Yes  No 

Secondary Email Address \_\_\_\_\_

Are You a Green Card Holder? Yes  No 

Occupation / Profession \_\_\_\_\_

Have you spent 6 or more months in the US within the last 3 years? Yes  No 

Employer \_\_\_\_\_

Self-Certification Form? Yes  No 

Employer Address Street \_\_\_\_\_

Town/City \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Phone (Home) \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Cellular \_\_\_\_\_

Parish/State \_\_\_\_\_

Post/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Phone (Work) \_\_\_\_\_

(\_\_\_\_)\_\_\_\_-\_\_\_\_ Cellular \_\_\_\_\_

Are you a Director or Senior Officer of a publicly traded company? Yes  No 

If yes, name(s) of company(ies) \_\_\_\_\_

Are you individually, or as a part of a group, a majority shareholder in a publicly traded company? Yes  No 

If yes, name(s) of company(ies) \_\_\_\_\_

Are you individually, or as a part of a group, the substantial owner / shareholder of a US Foreign Entity? Yes  No 

If yes, name(s) and address of entity(ies) \_\_\_\_\_

Interests / Hobbies \_\_\_\_\_

**3 CLIENT PROFILE****Risk Tolerance**Low to Moderate Moderate High to Speculative **Investment Objective**Purchase Asset Retirement Cash Flow Management 

Other \_\_\_\_\_

**Investment Horizon**One to Six Months Six Months to a Year One to Five Years Over Five Years **Investment Instruments that you will invest in: (Portfolio Mix)**Commercial Paper Yes  No Foreign Currency Instruments Yes  No Government of Jamaica Securities Yes  No Mutual Funds Yes  No Equities Yes  No

**Annual Gross Income**

Account Holder

	A	B	C	D
up to \$1M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$1M to \$2M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$2M to \$5M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over \$5M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Net Worth**

Account Holder

	A	B	C	D
Under \$1M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$1M to \$2M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$2M to \$5M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$5M to \$10M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$10M to \$25M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over \$25M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Source of funding for the account: \_\_\_\_\_

Are you a recipient of overseas income? Yes  No

If yes, give details: \_\_\_\_\_

Have you or any relative or close associate been entrusted with any prominent public functions in Jamaica or elsewhere? Yes  No

If yes give details: \_\_\_\_\_

**4 HOW CAN WE BETTER SERVE YOU?**

Do you have an account or do business with any of the subsidiaries within the JN Group?

JN Bank	<input type="checkbox"/>	JN Life	<input type="checkbox"/>
Jamaica Automobile Association	<input type="checkbox"/>	Management Control Systems Ltd.	<input type="checkbox"/>
JN Small Business Loans Ltd.	<input type="checkbox"/>	JN Money Services Ltd.	<input type="checkbox"/>
Jamaica General Insurance Company Ltd.	<input type="checkbox"/>	Management Control Information Systems Ltd.	<input type="checkbox"/>

How did you hear about us?

Printed Media	<input type="checkbox"/>
Electronic Media	<input type="checkbox"/>
Financial Advisor	<input type="checkbox"/>
Referral	<input type="checkbox"/>
Internet	<input type="checkbox"/>

Which correspondence would you like to receive?

JNFM Electronic Publications	<input type="checkbox"/>
Information on JNFM Events	<input type="checkbox"/>

Please indicate the authority granted to JN Fund Managers Limited as portfolio manager:

- full discretion;** (client grants, full authority, without consultation);
- partial discretion;** (client must be contacted before execution of any trade/transaction);
- custody;** (no discretion to trade. Assets are for safe keeping and reporting only).

Other \_\_\_\_\_

Would you like us to send you text messages regarding your investment? Yes  No

If "Yes" number to text messages to: ( \_\_\_\_\_ ) - \_\_\_\_\_

**5 CLIENT AUTHORIZATION**

I/We certify that the information contained herein is accurate and agree to the Terms and Conditions of this Agreement.

Signing Authority

AND OR

\_\_\_\_\_  
Signature ( A )

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

\_\_\_\_\_  
Signature ( B )

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

\_\_\_\_\_  
Signature ( C )

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

\_\_\_\_\_  
Signature ( D )

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

**Internal Use Only:**

New Account  Existing Account  Account Number \_\_\_\_\_ Date a/c opened \_\_\_\_\_

Dealer Representative Name \_\_\_\_\_ Reviewed By \_\_\_\_\_

Dealer Representative Signature \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

## JN FUND MANAGERS LIMITED CLIENT AGREEMENT TERMS & CONDITIONS

1. This AGREEMENT ("Agreement") is made on the Date specified overleaf between JN Fund Managers Limited (JNFM) and the party described overleaf as "the client" WHEREBY JNFM will as principal engage in Asset Transactions and other transactions from time to time on behalf of the client.
2. This Agreement also sets forth the terms and conditions under which from time to time, in its sole discretion, JNFM may offer to sell to the client, who in their sole discretion, agree to purchase from, in each case without recourse, Participations in Assets pursuant to the terms and conditions set forth in Certificates of Participation or Repurchase Agreements or such other investment instruments agreed with the client hereinafter called "Documents of Participation".
3. JNFM agrees to handle all transactions relating to an asset and the respective documents in accordance with its usual practices in the ordinary course of its business. JNFM shall not be liable to the client for any error in judgment or for any action taken or omitted to be taken by JNFM, except for gross negligence or wilful misconduct. Except to the extent otherwise provided herein, neither JNFM nor any of its officers, directors, employees, attorneys or agents shall have any further obligation or responsibility to the client of any kind whatsoever in connection with the performance of JNFM's duties under the Documents of Participation.
4. Where the client comprises more than one person, they shall be deemed to be joint tenants for all purposes in connection herewith unless specific written instructions to the contrary signed by each of such persons are given to JNFM. On the death of any of the persons constituting the client (being survived by any other such person) the Agreement shall not terminate and except in the case of the trustees, the interest of the deceased in the securities will automatically enure to the benefit of the survivor(s) unless otherwise specified.
5. Subject to its policies, JNFM may follow the instructions of any one account holder and, if inconsistent instructions are received or JNFM reasonably believes instructions from one account holder may not be mutually agreeable to all, JNFM in its discretion may do any one or more of the following, (i) suspend all activities on the account until written instructions signed by all accounts holders are received, (ii) close the account and deliver all assets in the names of all account holders, net of debits and credits to the address of record, or (iii) take other appropriate action.
6. JNFM is authorized, **but not** required, to accept and act in accordance with instructions received by telephonic communication to execute transactions to purchase, sell or otherwise deal with the assets. The client agrees to indemnify and hold JNFM harmless from and against any loss, cost or liability paid or incurred by JNFM as a result of acting in accordance with telephonic instructions which it believed in good faith to be issued by the client. JNFM will require receipt of written confirmation (by facsimile transmission or otherwise) of telephonic instructions prior to executing such instructions. **The client HEREBY UNDERSTANDS AND AGREES THAT JNFM MAY TAPE RECORD ANY OF YOUR TELEPHONE CONVERSATIONS WITH JNFM.**
7. Client statements of account and all transaction certificates shall be conclusive if not objected to in writing within five days, in the case of certificates (transaction confirmations), and ten days, in the case of account statements, after such documents have been transmitted to the client by mail or otherwise, regardless whether such documents are actually received.
8. If either party hereto fails to remit to the other funds when required to with respect to an asset transaction or Documents of Participation, the party required to remit such funds shall pay to the other interest on the amount not remitted, for each day until the date of delivery of such amount in immediately available funds to the party entitled thereto, at (i) a fluctuating rate per annum, computed for actual days elapsed on the basis of a year of 365 days, equal to the six-month Treasury Bill Rate, or (ii) if a currency other than Jamaican dollars (J\$) is involved, an overnight rate reasonably determined by JNFM.
9. JNFM will make all statutory deductions in accordance with applicable laws and pay over to the appropriate statutory authority.
10. The client(s) may not, (i) assign their rights and obligations hereunder without obtaining the prior written consent of an authorized representative of JNFM, which consent shall not be unreasonably withheld, or (ii) sell, assign, convey, transfer, subdivide, sub-participate or otherwise dispose of all or any part of any Documents of Participation acquired by them hereunder, nor create or permit to exist any lien or security interest thereon without obtaining the prior written consent of JNFM, which consent shall not be unreasonably withheld.
11. The client(s) authorizes JNFM, in its discretion, to obtain reports concerning their credit standing and business conduct. They may make a written request within a reasonable period of time for a description of the nature and scope of the reports obtained by JNFM.
12. The client(s) hereby understands and agrees that:
  - a. JNFM may record and store all information on their account in such form and by such means as JNFM deems fit.
  - b. JNFM may use the services of its parent company or its parent company's subsidiaries and/or affiliates or any electronic data processing service provider in connection with the management of their accounts and the related data.
  - c. JNFM will request from any other member of the JN Group any information financial or otherwise that they may have in respect of the client to enable JNFM to better manage its business relationship with the client.
  - d. Save and except where the client communicates an objection to JNFM in writing, the client's personal information may be shared with JNFM's parent company or its parent company's subsidiaries and affiliates.
13. The client hereby agrees that this Agreement and all the terms hereof shall be binding upon them and their estate, heirs, executors, administrators, personal representatives, successors and assigns. This Agreement shall cover individually and collectively all accounts, joint, single or in a fiduciary capacity, which are held by JNFM for them. This Agreement shall be applicable to all existing transactions between JNFM and the client as well as all future transactions in the nature contemplated herein and shall remain in effect irrespective of any interruptions in the business relations of the client with JNFM.
14. These terms and conditions and the documents to which they are annexed will be governed by and construed in accordance with the laws of Jamaica. The courts of Jamaica are to have exclusive jurisdiction to settle any disputes or claims that may arise out of or in connection with such documents for which purpose all parties agree to submit to the jurisdiction of the courts of Jamaica.
15. Any complaints by the client should in the first instance be made in writing to the Compliance Officer c/o of JN Fund Managers Limited at 17 Belmont Road, Kingston 5.
16. No warranty is given by JNFM as to the performance or profitability of the client's investment portfolio or any part thereof.
17. The client shall not acquire title to or a proprietary interest in any securities hereunder until JNFM has received from the client full value of the funds to acquire the same and where payment has been made by cheque or other negotiable instrument until such cheque or instrument has been cleared or honored as the case may be.
18. **YOU UNDERSTAND, AND ACKNOWLEDGE THAT JNFM HAS INFORMED YOU, THAT:**
  - a. ANY INVESTMENT MADE UNDER THE TERMS OF THIS AGREEMENT IS NOT THE SUBJECT OF INSURANCE BY THE DEPOSIT INSURANCE ACT
  - b. ANY INVESTMENT MADE UNDER THE TERMS OF THIS AGREEMENT IS NOT AN OBLIGATION OF OR GUARANTEED BY JNFM.
  - c. ANY INVESTMENT MADE UNDER THE TERMS OF THIS AGREEMENT IS SUBJECT TO INVESTMENT RISK, INCLUDING BUT NOT LIMITED TO THE POSSIBLE LOSS OF THE PRINCIPAL INVESTED.
19. Upon signature of the Instructions or other documents to which these terms and conditions are attached the client shall be deemed to have read and understood the contents thereof and to have accepted that the details set out in the Schedule thereto are correct.