e-Mone	v account a	pplication	form – Euro	pe/EEA (EMA)
		ppneation		

Type of account you would like to have:

Private Corporation

Corporate e-Money Account CSFA (Client Segregated Fund Account)

1. Business overview

Type of entity:

Registered corporate name		Trading as name		
Country of incorporation	VAT number	Company registration num	ber	Date of incorporation
Number of employees	Length of time in business	Corporate website		
	YRS			
Registered address				
City		County / State		Postcode
Phone number		Email		
Business Operations Address				
Regulated service? Regulated	or			
No Yes				
Licence type	Licence number		Jurisdiction	
Is applying company owned by a				
No Yes, please speci	fy the name of the parent compa	any		
Is the company or parent company	ny publicly listed on a stock exch	ange?		
No Yes, please speci	fy the name of the stock exchange	ge		Code:
Is the company a registered "not f	for profit" organisation?			No Yes
Has the company been establishe	ed as a holding company of stock	ks or shares?		No Yes
Has the company been establisher real property or maritime assets?	ed to hold intangible or other ass	sets, including IP,		No Yes
Has the company been establishe corporate mergers or act as group		sset transfers,		No Yes
APPLICATION CONTACT				
Name				
Phone		Email		

Public Limited Company

Other:

iSXMoney

2. Contacts

Principal contact	
First name	Last name
E-mail address	*Telephone number
Secondary contact	
First name	Last name
E-mail address	*Telephone number
*Including international Country code	

ADDITIONAL COMMENTS

Please let us know if you have any further comments or information

Please ensure that your application form and additional documentation is complete and correct.

Application requirements can be found in our separate "Merchant Application Checklist".

By submitting this form, you confirm that all information provided is accurate, complete and truthful and you consent to credit and information verification checks being performed.

Completed applications can be submitted to: **emoney@isxfinancial.com** For more information please contact: **+357 22 052 658**

3. Business profile

We appreciate your interest in opening an account with ISXpay. We are pleased to provide you with this declaration form. This will enable us to simplify our on-boarding process, understand if your business fits our risk appetite and quickly know if we can meet your business needs.

YOUR BUSINESS

What your business does (which industries you operate in):

Back office Services	CFD's/Forex
Holding Company/Trust	Crypto
IT	Gaming
Investment	Gambling
Online retailer/e-commerce (Specify products)	Affiiliate marketing
Corporate Service provider	Financial Institution
Adult	Payment Agent
Consulting Services	Other (Specify)

Other product/services:

Please indicate whether you offer any products/services that you intend to exclude from what ISX Financial's processes.

Your customers:			
General puplic or individuals		Affiliates	
Legal Entities (Specify Names	5)	Other (Specify)	
PSP's			
Customers location:			
EU			
Non EU (Specify Countries)			
e-Money Account			
Source of your Funds:			
Card Payments		EU	
Electronic Payments		Non EU (Specify Countries)	
Intergroup Payments		Non Lo (Speeny countries)	
Dividends			
Settlements from PSP's			
Other (Specify)			
Destination of your Funds:			
Payroll Payments		EU	
Dividends Distribution		Non EU (Specify Countries)	
General Business Expenses			
Payments to Suppliers (Specif	fy names)		
Intergroup Transfers			
Settlements to PSP's			
Other (Specify)			
Payment Volumes:			
5000 - 10,000	euro/month	300,000 - 500,000	euro/month
10,000 - 100,000	euro/month	500,000 - 1,000,000	euro/month
100,000 - 300,000	euro/month	1,000,000 - 5,000,000	euro/month
		5,000,000+	euro/month

+357 22 052 658

4. Directors details

DIRECTORS - INDIVIDUALS

The information below is required for all company directors. AML Regulations require that directors details be verified by us. Copy this page if there are more than four (4) directors.

	First name		Last name	
	Date of birth	Time holding the position	Passport/ID number	Nationality
	Social security number / TIN	Mobile phone number	Email	
	Permanent residential address			
	City	Postcode	Country	
	This person (or any of the person's Are you a US citizen or resident'		ds/has held a political or public position	on (PEP*) Yes No
	Are you a 05 chizen of resident	: Tes Tivo		
2	First name		Last name	
	Date of birth	Time holding the position	Passport/ID number	Nationality
	Social security number / TIN	Mobile phone number	Email	
	Permanent residential address			
	City	Postcode	Country	
	This person (or any of the person's	relatives or close associates) hold	ds/has held a political or public position	on (PEP*) Yes No
	Are you a US citizen or resident	? Yes No		
Judicia			prominent public function (e.g. Head of State rs, children, parents) or persons known to be	
lackno	owledge that subject to FATCA being applic		to report to the Internal Revenue Service (IRS) sses and any other necessary information pur	

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3	First name		Last name	
	Date of birth	Time holding the position	Passport/ID number	Nationality
	Social security number / TIN	Mobile Phone Number	Email	
	Permanent residential address			
	City	Postcode	Country	
	This person (or any of the person)	's relatives or close associates) hold	s/has held a political or public posit	ion (PEP*) Yes No
	Are you a US citizen or residen			
	Are you a US citizen or residen			
	Are you a US citizen or residen		Last name	
		Time holding the position	Last name Passport/ID number	Nationality
	First name			Nationality
	First name Date of birth	Time holding the position	Passport/ID number	Nationality
	First name Date of birth Social security number / TIN Permanent residential address	Time holding the position Mobile Phone Number	Passport/ID number Email	Nationality
	First name Date of birth Social security number / TIN	Time holding the position	Passport/ID number	Nationality
	First name Date of birth Social security number / TIN Permanent residential address City	Time holding the position Mobile Phone Number Postcode 's relatives or close associates) hold	Passport/ID number Email Country	

*A politically Exposed Person (PEP) is a natural person who is or has been entrusted with a prominent public function (e.g. Head of State, Member of Parliament, Members of the Judiciary, Ambassadors, etc.) including his/her immediate family members (spouse, partners, children, parents) or persons known to be close associates of such persons (e.g. business associates).

I acknowledge that subject to FATCA being applicable to me, ISX Financial shall be bound to report to the Internal Revenue Service (IRS) that I retain this account with ISX Financial, and when obliged, shall disclose my name as shown in this account, TIN's, addresses and any other necessary information pursuant to the regulations of FATCA

5. Directors details

DIRECTORS - Corporate

The information below is required for all company directors. AML Regulations require that directors details be verified by us. Copy this page if there are more than four (4) directors.

	Company Registration Name			Company Registra	tion Nu	umber	
	Date of incorporation	Phone Nun	nber				
	Registered Address						
	City		Postcode			Country	
2	Company Registration Name			Company Registra	ition Ni	umber	
	Date of incorporation	Phone Nun	nber				
	Registered Address						
	City		Postcode			Country	
*A pol	itically Exposed Parcon (PED) is a natural pe	rcon who is or k	has been entrusted with a n	rominant public function	n (e.a. H	ead of State, Member of Parliament, Members of t	he
Judicia busine	ary, Ambassadors, etc.) including his/her im ess associates).	mediate family	members (spouse, partner	s, children, parents) or pe	ersons ki	nown to be close associates of such persons (e.g.	
	ial, and when obliged, shall disclose my na					Service (IRS) that I retain this account with ISX rmation pursuant to the regulations of FATCA	

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6

6. Shareholders details

SHAREHOLDERS - INDIVIDUALS / CORPORATE

The information below is required for all shareholders holding more than 25% of shares or voting rights, or those with a controlling interest. If the shareholders are corporations, further information for the holding company and the personal information of the shareholders are required. AML Regulations require that shareholder and ultimate beneficial owner details be verified by us.

Image: Second	% of shares
Date of birth / Incorporation Social security number / TIN / VAT Phone number Time holding the Email Permanent residential / business address This person (or any of the person's relatives or close associates) holds/has held a political or public position (PEP*) Does this shareholder act as a nominee on behalf of beneficial owner? Yes No Are you a US citizen or resident? Yes No Individual Trust Private PLC Other: First name / company name Last name Nationality / Country of incorporation Date of birth / Incorporation Social security number / TIN / VAT Phone number Time holding the	
Image: Second	
Individual Trust Private PLC Other: First name / company name Last name Passport / ID number / Company registration number Expiry date Nationality / Country of incorporation Date of birth / Incorporation Social security number / TIN / VAT Phone number Time holding the	Yes No
2 Individual Trust Private PLC Other: First name / company name Last name Passport / ID number / Company registration number Expiry date Nationality / Country of incorporation Date of birth / Incorporation Social security number / TIN / VAT Phone number Time holding the	Yes Nc
First name / company name Last name Passport / ID number / Company registration number Expiry date Nationality / Country of incorporation Date of birth / Incorporation Social security number / TIN / VAT Phone number Time holding the	
Passport / ID number / Company registration number Expiry date Nationality / Country of incorporation Date of birth / Incorporation Social security number / TIN / VAT Phone number Time holding the	
	% of shares
Email Permanent residential / business address	position
This person (or any of the person's relatives or close associates) holds/has held a political or public position (PEP*)	Yes No
Does this shareholder act as a nominee on behalf of beneficial owner? Yes No Are you a US citizen or resident? Yes No	
*A politically Exposed Person (PEP) is a natural person who is or has been entrusted with a prominent public function (e.g. Head of State, Member of Parlian Judiciary, Ambassadors, etc.) including his/her immediate family members (spouse, partners, children, parents) or persons known to be close associates of business associates). I acknowledge that subject to FATCA being applicable to me, ISX Financial shall be bound to report to the Internal Revenue Service (IRS) that I retain this ac Financial, and when obliged, shall disclose my name as shown in this account, TIN's, addresses and any other necessary information pursuant to the regular	

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Individual Trust	Private PLC O	her:	
First name / company name		Last name	% of shares
Passport / ID number / Company regis	tration number Expiry da	ate Nationality / Country of in	ncorporation
Date of birth / Incorporation	Social security number / TIN / VAT	Mobile Phone Number	Time Holding Position
Email		Permanent residential / business a	ddress
Does this shareholder act as a Are you a US citizen or residen	a nominee on behalf of beneficial t? Yes No	owner? Yes No	
Individual Trust	Private PLC O	ther:	% of shares
		Last name	
First name / company name		Last name	
First name / company name Passport / ID number / Company regis	tration number Expiry date	Last name Nationality / Country of in	ncorporation Time Holding Position
First name / company name Passport / ID number / Company regis Date of birth / Incorporation Email This person (or any of the pers	tration number Expiry date	Last name Nationality / Country of in Mobile Phone Number Permanent residential / business ac	ncorporation Time Holding Position ddress

*A politically Exposed Person (PEP) is a natural person who is or has been entrusted with a prominent public function (e.g. Head of State, Member of Parliament, Members of the Judiciary, Ambassadors, etc.) including his/her immediate family members (spouse, partners, children, parents) or persons known to be close associates of such persons (e.g. business associates).

I acknowledge that subject to FATCA being applicable to me, ISX Financial shall be bound to report to the Internal Revenue Service (IRS) that I retain this account with ISX Financial, and when obliged, shall disclose my name as shown in this account, TIN's, addresses and any other necessary information pursuant to the regulations of FATCA

7. Signatory details

Signatories - INDIVIDUALS

The information below is required for new signatories. AML Regulations require that signatory details be verified by us.

	First name		Last name	
	Date of birth	Time holding the position	Passport/ID number	Nationality
	Social security number / TIN	Mobile phone number	Email	
	Permanent residential address			
	City	Postcode	Country	
	This person (or any of the person's	s relatives or close associates) hold	s/has held a political or public positic	on (PEP*) Yes No
	Are you a US citizen or resident	? Yes No		
	First name		Last name	
	Date of birth	Time holding the position	Passport/ID number	Nationality
	Social security number / TIN	Mobile phone number	Email	
	Permanent residential address			
	City	Postcode	Country	
	This person (or any of the person's	s relatives or close associates) hold	s/has held a political or public positic	on (PEP*) Yes No
	Are you a US citizen or resident	? Yes No		
Judicia busine	ary, Ambassadors, etc.) including his/her im ess associates).	mediate family members (spouse, partner	orominent public function (e.g. Head of State, s, children, parents) or persons known to be o report to the Internal Revenue Service (IRS)	close associates of such persons (e.g.
			ses and any other necessary information pur:	

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9

3	First name		Last name	
	Date of birth	Time holding the position	Passport/ID number	Nationality
	Social security number / TIN	Mobile Phone Number	Email	
	Permanent residential address			
	City	Postcode	Country	
	This person (or any of the person)	's relatives or close associates) hold	s/has held a political or public posit	ion (PEP*) Yes No
	Are you a US citizen or residen			
	Are you a US citizen or residen			
	Are you a US citizen or residen		Last name	
		Time holding the position	Last name Passport/ID number	Nationality
	First name			Nationality
	First name Date of birth	Time holding the position	Passport/ID number	Nationality
	First name Date of birth Social security number / TIN Permanent residential address	Time holding the position Mobile Phone Number	Passport/ID number Email	Nationality
	First name Date of birth Social security number / TIN	Time holding the position	Passport/ID number	Nationality
	First name Date of birth Social security number / TIN Permanent residential address City	Time holding the position Mobile Phone Number Postcode 's relatives or close associates) hold	Passport/ID number Email Country	

*A politically Exposed Person (PEP) is a natural person who is or has been entrusted with a prominent public function (e.g. Head of State, Member of Parliament, Members of the Judiciary, Ambassadors, etc.) including his/her immediate family members (spouse, partners, children, parents) or persons known to be close associates of such persons (e.g. business associates).

I acknowledge that subject to FATCA being applicable to me, ISX Financial shall be bound to report to the Internal Revenue Service (IRS) that I retain this account with ISX Financial, and when obliged, shall disclose my name as shown in this account, TIN's, addresses and any other necessary information pursuant to the regulations of FATCA

Required documentation

Please provide all the supporting documentation as requested below. ISX Financial EU PLC reserves the right to request additional information/documentation in order to fulfill regulatory requirements related to Prevention of Money Laundering and Combating the Financing of Terrorism. ISX Financial EU PLC (HE348009) is an EU authorized electronic money institution by the Central Bank of Cyprus, license number 115.1.3.17.

1. Memorandum and Articles of Association

2. Certificate of Incorporation

3. Certificate of Directors and Secretary, Certificate of Shareholders, Certificate of registered address 4. Legal ownership structure leading to the beneficial owner and certified by UBO or senior director 5. Trust deed(s) between the beneficial owner(s) and the registered shareholder(s) acting as nominees (if applicable) 6. Certificate of registered shareholders, Certificate of incorporation, Certificate of registered address and Certificate of directors for every company participating in the ownership structure of the customer and which holds directly or indirectly 25% or more of the shares 7. Proof of identity verification through ISX Financial online process or ID/passport and proof of permanent resident address (e.g. utility bill) of registered shareholders, directors, beneficial owners and authorized signatories 8. Copy of official authorization or license if required for certain Businesses (e.g. gambling)

Documents must not be older than six months. In case of utility bills, they should be no more than three months old.

AML Regulations require that directors and ultimate beneficial owner details be verified by us. We verify the identity of individual directors and beneficial owners listed on the merchant application form online with our Paydentity solution using their email address. A convenience fee of € 10 to use the remote onboarding system will be charged directly to the individuals. Please notify them in advance that they will receive an email request from us.

If any individual person does not want to proceed with our Paydentity solution to verify their identity, each individual will

need to provide a certified copy of ID/pass port and a recent utility bill to our postal address.

Privacy Notice

ISX Financial EU PLC acts as the "Controller" of all the personal data of natural persons connected to the applicant (as they may be appointed as directors, secretary, beneficial owners, shareholders, authorized signatories/representatives) and thus collected under this application form and any other related personal data which will be obtained independently of this application.

The collection and processing of the personal data is necessary for the purposes of compliance with legal obligations imposed by laws, regulations and/or card schemes as well as for the achievement of the legitimate interests of the Company and particularly:

• for the provision of our services;

• for compliance with our due diligence procedures, risk assessment and analysis;

 for the detection and prevention of fraud and any other criminal activity which ISX Financial EU PLC is bound to report to competent authorities;

Personal data will be kept in our records for the duration of the provision of our services and as long as required under any relevant regulations.

Safeguarding the security and confidentiality of collected personal data is a priority for iISX Financial EU PLC. The Company has taken all the necessary measures to maintain the security of the data.

Further details as to collection, processing and protection of personal information are available under Company's Privacy Notice, accessible from

11

https://www.isx.financial/legalprivacyy

and as updated from time to time.

DECLARATION

I hereby declare that the details above are true and accurate as to the date below.

Full Name		Job title
Authorised signature	Date	

MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS OF THE COMPANY

DATED _____ FOR OPENING AN EMONEY ACCOUNT

То:		
ISX Financial EU PLC		
Address:		
Makrasykas 1, 5 th floor, Strovolos, Nicosia 2034, Cyprus		

At the meeting of the Board of Directors of		("hereinafter referred to as "Company")
duly convened and held at	on	the following resolutions were duly passed:

1. That Mr/Mrs_

is appointed Chairman for the purposes of the present meeting.

2. That the Company opens an eMoney account with ISX Financial EU PLC ("hereinafter referred to as "ISXPay") with a purpose of ISXPay Facilitation Services.

3. That the mandate for opening of merchant account by the Company and/or any other document that may be required by ISXPay regarding the opening of (merchant) account as provided herein be signed on behalf of the Company by

("hereinafter referred to as "the Authorised Signatories").

4. That the signatures set in the "List of Authorised Signatories and Specimen Signatures" herein attached are those of the Authorised Signatories of the Company authorized to sign, that such signatures are the genuine signatures of such persons and that such signatures operate at the specimen signatures of each such persons.

5. That the above mentioned Authorised Signatories or any one of the Directors of the Company as provided and/or required by the Laws of

and/or by the incorporating documents of the Company or any special resolution amending the appointed Directors, be authorized and by the present are authorized at any time and from time to time to open and/or close Company account/accounts with ISXPay and in this regard to sign any document and/or agreement and/or application and/or any other document that may be required by ISXPay for the purposes of providing Services to the Company.

6. To give ISXPay a copy of the Memorandum and Articles of Association of the Company and to furnish ISXPay with any copies of any special

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resolutions amending the same which shall be passed from time to time.

7. To give ISXPay a list of the names of the members of the Board of Directors, of the Secretary and of other officers of the Company and to authorize ISXPay to act based on any information provided to ISXPay by any Director or the Secretary of the Company in respect of any changes to such list.

8. That all correspondence and statements in connection with Account(s) held with ISXPay shall be sent to

(please specify email address) unless ISXPay is otherwise instructed in writing by the Authorised Signatories of the Company.

- 9. That ISXPay will be provided with the following documents:
- Memorandum and Articles of Association of the Company
- Certificate of incorporation
- Certificate of shareholders
- Certificate of Directors and Secretary
- Certificate of the Company's Registered Office

10. To notify these resolutions to ISXPay which shall remain in effect until a resolution has been passed amending the same by the Directors of the Company and a copy thereof certified by any of the Directors or by the Secretary is notified to ISXPay

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It is certified that the above resolutions have been unanimously passed by the Board of Directors of the Company in quorum in accordance with the Articles of Association of the Company which has been signed by the Chairman and duly entered in the Minute Book of the Company.

Chairman	
Name	Signature
Secretary	
Name	Signature
Directors	
Full Name	Signature
Full Name	Signature
Full Name	Signature
Full Name	Signature
Full Name	Signature
	Syntace
Date	
Seal	

List of Authorized Signatories and Specimen Signatures

Company Name:

eMoney Account:

(MANDATORY FIELDS) - To be filled in by the authorised signatory of the e-Money Account)

FULL NAME of SIGNATORIES	SPECIMEN SIGNATURES	DATE

We hereby confirm the signatures of the above authorized persons to sign on behalf of the Company.

Signed by the directors of the company:

Name in print	Signature
Name in print	Signature
Name in print	Signature
Name in print	Signature
Name in print	Signature
Date	
Seal	

REF: 3011021