

Product Application Form

PAF3 | Dealing Services

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Platform | Investment | Bank

Product Application Form

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Please complete all relevant fields, as missing information will cause delays when processing your application.

Please Note: This form has been optimised for digital use to avoid as much paper waste as possible. Please download and save this file locally on your device that you are using and open with Adobe Acrobat.

You do not need a paid account, but you may need to configure your digital ID for signing (to do this, please follow the 'on screen' steps when using the signature option in Adobe Acrobat).

1 Applicant Details

Individual Applicant	Title	<input type="text" value="MR"/>	Second Applicant (If Applicable)	Title	<input type="text" value="MRS"/>
Surname	<input type="text" value="RICARDO"/>		Surname	<input type="text" value="DULCE MARIA"/>	
Forename(s)	<input type="text" value="VARGAS CANTO"/>		Forename(s)	<input type="text" value="HERNANDEZ PEREZ"/>	
Other/Maiden	<input type="text"/>		Other/Maiden	<input type="text"/>	

Corporate Applicant (If Applicable)

Company Name

Trust Applicant (If Applicable)

Trust Name

Trustees Name

2 Dealing Services Confirmation

In completing this Product Application Form, you are applying for an execution only dealing service and will become an execution only client of Capital International Limited ("CIL"). You will be subject to our Terms of Business for Investment Services and specifically sections that detail the Execution Only Service.

Attention is drawn to the fact that as an execution only client of CIL, the regulatory protections afforded to you under the Isle of Man Financial Services Act 2008 Financial Services Rulebook are less than those afforded to a client receiving advice.

Execution Only Service

Nature and Intended Purpose of Account

INCREASE MY ASSETS TO INVEST IN MY BUSINESS IN THE FUTURE AND PROVIDE ECONOMIC SECURITY TO MY FAMILY

Kinesis Service

Execution only clients of CIL also have access to our Kinesis Service; by selecting the Kinesis Service box below, CIL will provide a dealing service in Principal Contracts issued by Capital Financial Markets Limited ("CFM"), which includes Prism Horizon Limited Liability Contracts (Prism Profiles) and other derivative contracts provided by CFM or other contract providers.

Kinesis Service

Attention is drawn to the fact that in selecting the Kinesis Service, you will be subject to additional sections in our Terms of Business for Investment Services, specifically the sections entitled 'Kinesis Rules' and 'Kinesis Risks'.

3 Charges and Commission: Please provide a tariff sheet when you return this form.

Details of charges, commissions and other fees are set out in the tariff sheet. If you do not have access to the applicable tariff sheet, please contact the Business Development Team to obtain this: businessdevelopment@capital-iom.com

Product Application Form

PAF3 | Dealing Services



4 Investment Details Please complete all sections

4.1 Initial Investment Details

Reporting Currency Initial Investment Amount and Currency

Please indicate the origin(s) from where you are funding your account: Cash Asset Transfer Both

4.2 Cash Transfer Details

Please state the main bank details from which you are sending monies to fund your new account below:

The sort code and account number, SWIFT/BIC Code or IBAN can be obtained from your Bank.

Bank Name

Branch

Account Currency Other Branch Sort Code

Account Name

Account Number or IBAN SWIFT/BIC Code

How long has the account been open for?

I/we can confirm that these bank account details will also be used for any future cash transfers into this account.

Additional Cash Transfer Details (If Applicable)

Please state the bank details from where you are sending monies to fund your new account below:

The sort code and account number, SWIFT/BIC Code or IBAN can be obtained from your Bank.

Bank Name

Branch

Account Currency Other Branch Sort Code

Account Name

Account Number or IBAN SWIFT/BIC Code

How long has the account been open for?

I/we can confirm that these bank account details will also be used for any future cash transfers into this account.

4.3 Asset Transfer Details

Please state the company details currently holding your assets which you are transferring to fund your new account:

Value of Asset Transfer

Tick what the asset value is at time of transfer: Market Value Book Cost

Please provide details of where the Asset Transfer is coming from:

Company Name

Company Address

Contact Name Contact Number

Contact E-mail

How long has the account been open for?

NOTE: A current valuation must be sent in with this Product Application Form which states the book costs of each asset to be transferred. If the book costs are not provided for the individual assets then the current market value will be used instead.

Product Application Form

PAF3 | Dealing Services



4 Investment Details (continued) Please complete all sections

4.4 Source of Funds

Please complete the below table to confirm how the outlined investment amount has been accumulated for the First Applicant.

Value	Currency	Source of Funds Description	Country	Time to accumulate
47,000.00	USD	INVESMENT WITH HANSARD (HIL)	UNITED KINGDOM	12 YEARS
Notes THE CLIENT HAS FINANCED THIS INVESTMENT WITH THE PROFITS THAT HIS FOOD BUSINESS HAS LEFT HIM FOR MORE THAN 20 YEARS OF WORK.				
Notes				

For Second Applicant (If Applicable)

Please complete the below table to confirm how the outlined investment amount has been accumulated for the Second Applicant.

Value	Currency	Source of Funds Description	Country	Time to accumulate
Notes				
Notes				

Product Application Form

PAF3 | Dealing Services



5 Ongoing Investment Details

Are there any future planned receipts or withdrawals? YES NO

If there are no planned receipts or withdrawals indicated in the fields below, a top up or withdrawal form will be required for each transaction.

Number of planned future receipts per year

Approx. total value and currency of yearly planned receipts

Number of planned future withdrawals per year

Approx. total value and currency of yearly planned withdrawals

Please complete the table below to confirm how the funds outlined above were accumulated.

Value	Currency	Source of Funds Description	Country	Time to accumulate
180,000.00	USD	BANK SAVINGS	MEXICO	8 YEARS
Notes THE CLIENT HAS SAVINGS DEPOSITED IN A NATIONAL BANK, SUCH SAVINGS HAVE BEEN ACCUMULATED FOR MORE THAN 8 YEARS FROM THE PROFITS OBTAINED FROM HIS FAMILY BUSINESS.				
Notes				

6 Source of Wealth

Please provide an overview of your total accumulated wealth, how it has been accumulated and over what period.

What is your total accumulated wealth? Amount: Currency:

How is the above wealth held and how was it accumulated?

Wealth held	Country	Amount	Currency	Time to accumulate
REAL ESTATE	MEXICO	230,000.00	USD	30 YEARS
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.		THIS IS THE VALUE OF THE CLIENT'S PRIVATE RESIDENCE, WHICH WAS A FAMILY INHERITANCE. INCREASING ITS VALUE THROUGH EXPANSION AND REMODELING BY THE CUSTOMER.		
BANK ACCOUNTS	MEXICO	290,000.00	USD	17 YEARS
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.		THE CLIENT HAS AROUND \$5,000,000 MXN IN HIS BANK ACCOUNTS AND INVESTMENTS, ACCUMULATED BY PROFITS EARNED FROM HIS FAMILY BUSINESS.		
VEHICLES	MEXICO	105,000.00	USD	3 YEARS
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.		THE CUSTOMER HAS TWO VEHICLES FOR PERSONAL USE, WHICH HE HAS ACQUIRED WITH FINANCING WHICH IS PAID WITH THE PROFITS OBTAINED FROM HIS BUSINESS AND HIS INVESTMENTS		
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.				

Product Application Form

PAF3 | Dealing Services



6 Source of Wealth (continued)

For Second Applicant (If Applicable)

What is your total accumulated wealth? Amount: Currency:

How is the above wealth held and how was it accumulated?

Wealth held	Country	Amount	Currency	Time to accumulate
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.				
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.				
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.				
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7 Intermediary Details

This section should only be completed by Intermediaries. Enter appropriate details here - avoid supplying information on separate sheets.

Intermediary/Company Name
 CIL Intermediary Number
 Sub-broker Company (if applicable)
 Contact Name Telephone Number
 E-mail Address

All terms must be agreed with Capital International Limited in advance.

Corporate Action Notification E-mail Address if different to above E-mail

Intermediary Declaration

Please confirm you have met with this client. YES NO

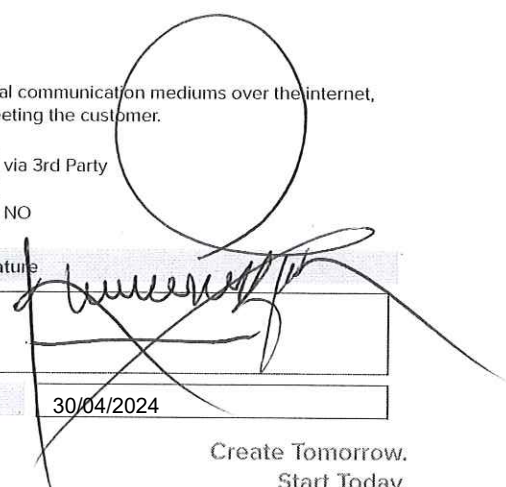
Meeting a customer is not limited to in person face to face contact. It also includes the use of visual communication mediums over the internet, such as video conferencing. A non-visual medium such as a telephone call does not qualify as meeting the customer.

Where have you obtained customer due diligence (CDD)? Direct via 3rd Party

If CDD was obtained via a third party, has the 3rd Party met with the client? YES NO

I confirm that:

- (i) I am the appointed intermediary for the above named client; and
- (ii) I have discussed the risks and suitability of this investment with my client within their overall investment portfolio; and
- (iii) The client has confirmed that they understand these risks and wish to proceed with the investment. I am not aware of any information that would lead me to believe that the client does not understand and accept these risks.

Signature 
 Date

Product Application Form

PAF3 | Dealing Services



8 Investment Manager Details

This section should only be completed by the Investment Manager. Enter appropriate details here - avoid supplying information on separate sheets.

Investment Manager Company	<input type="text"/>
CIL Investment Manager No.	<input type="text"/>
Contact Name	<input type="text"/>
Telephone Number	<input type="text"/>
E-mail Address	<input type="text"/>

All terms must be agreed with Capital International Limited in advance.

Corporate Action Notification E-mail Address if different to above E-mail	<input type="text"/>
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Investment Manager Declaration

I confirm that:

- (i) I am the appointed regulated investment manager for the above named client; and
- (ii) I have discussed the risks and suitability of this investment with my client within their overall investment portfolio; and
- (iii) The client has confirmed that they understand these risks and wish to proceed with the investment. I am not aware of any information that would lead me to believe that the client does not understand and accept these risks.

Signature

Date

9 Important Notes

- Investment Managers are not authorised to make any withdrawals from your accounts which they manage unless they are also your appointed intermediary on the account. In any event withdrawals are only ever paid directly to an account in your name.
- For the avoidance of doubt Capital International Group and any of its member companies are under no liability nor have any responsibility to monitor the investment activity or advice of your Investment Manager or Intermediary.
- Capital International Group and any of its member companies accept no liability in respect of any error made by your Investment Manager or Intermediary during the course of them providing their services to you in the provision of any instruction to us in connection thereto.
- If you select our Kinesis Service, it is the responsibility of your Investment Manager or Intermediary to provide you with an Operating Memorandum, referencing a Principal Contract issued by CFM that references an index issued by CFM, prior to any investment by you under the Kinesis Service.

10 Declaration & Signatures

I/We understand that the information I/we provide on this Product Application Form, together with any additional information supplied, will be processed (where applicable) in accordance with the data protection policy for Capital International Group and any of its member companies.

By signing below, I/we confirm that I/we have received the relevant documentation and advice relating to this investment, and Terms which I/we accept. I/We declare that:

- I/We am/are 18 years of age or over.
- I/We agree that the information contained within this Product Application Form is true and accurate.
- I/We confirm I/we have read and understood **Section 9 - Important Notes** in this Product Application Form.
- I/We understand that this Product Application Form is part of my/our agreement with you.
- I/We confirm that I/we understand and agree to the Details of charges, commissions and other fees as set out in the applicable tariff sheet, as referenced in **Section 3** of this Product Application Form.
- I/We have received, read, understood and agree to be bound by the **Terms of Business - Investment Services** issued by Capital International Limited.
- I/We further confirm that, where appropriate, I/we have taken independent advice on the suitability of this investment within my/our overall investment portfolio.

Product Application Form

PAF3 | Dealing Services



10 Declaration & Signatures (continued)

Intermediary Appointment (Where you have an Intermediary)

Unregulated Intermediaries are not permitted to have signing authority for dealing and withdrawal requests.

I/We declare that I/we have appointed:

Contact Name

Company Name

as my/our Intermediary in relation to this account, and authorise Capital International Limited to: (Please indicate as appropriate)

provide information to my/our Intermediary and any connected party.

to accept withdrawal requests from my/our Intermediary. to accept dealing instructions from my/our Intermediary.

Correspondence Options: I/We wish all correspondence and statements to be made available to my/our Intermediary.

Investment Manager Appointment (Where you have an Investment Manager)

I/we declare that I/we have appointed:

Contact Name

Company Name

in relation to this account, and authorise Capital International Limited to: (Please indicate as appropriate)

provide information to my/our Investment Manager.

to accept dealing instructions from my/our Investment Manager.

Correspondence Options: I/We wish all correspondence and statements to be made available to my/our Investment Manager.

Dealing Access If you wish to appoint an individual with dealing access, please provide their;

Name

Email Address

Telephone Number

Together with certified copies of their passport and proof of their residential address (no older than 6 months).

Authority for Joint Instructions Either to sign Both to sign

Signatures of ALL Applicants

First Applicant Signature

Print Name

Date

Second Applicant Signature

Print Name

Date

Sign on behalf of the client - Mandate must be supplied

Please sign below if a client has granted you signing rights via a mandate.

First person signing on behalf of client

Print Name

Date

Second person signing on behalf of client

Print Name

Date

Product Application Form

PAF3 | Dealing Services



Notes - If required please use the space below to provide further information.

ACCOUNT FUNDED WITH \$47,000 USD FROM HIS INVESTMENT ACCOUNT WITH HANSARD, CONTRACT NUMBER 547282M

THE CUSTOMER FOUNDED THE COMPANY "POLLO RICO" MORE THAN 20 YEARS AGO, DEDICATED TO THE SALE OF POULTRY AND ROASTED MEATS, THE COMPANY HAS HAD A STRONG POSITION IN THE REGION'S MARKET, COMPETING WITH NATIONAL CHAINS OF THE SAME LINE. THEY CURRENTLY HAVE FOUR BRANCHES DISTRIBUTED THROUGHOUT THE CITY.

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Issue Date: 05/03/2024

Ref: PAF3v9

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