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	SECURITIES ACCOUNT OPENING/REOPENING/DATA CHANGING ORDER (FOR LEGAL ENTITIES)		Edition 2	
			Effective date: January 24, 2017	

Securities account number (if any)																																					
Account Holder's status		<input type="checkbox"/> Owner <input type="checkbox"/> Nominee <input type="checkbox"/> Issuer					TIN																														
Account Holder's name																																					
Country of state registration						State registration date (dd/mm/yyyy)																															
State registration document						Series				Number																											
Name of the state registration authority																																					
Location (business address)																																					
Mailing address (if different from business address)																																					
CBA Net address (if any)																																					
Phone						Fax						Email																									
Response to inquiries and information to be delivered:		<input type="checkbox"/> In person <input type="checkbox"/> By post <input type="checkbox"/> By email to _____																																			
Servicing bank																																					
Bank account number (if any)																																					
Order to open/reopen or make changes to securities account																																					
<input type="checkbox"/> Open an account <input type="checkbox"/> Reopen the account <input type="checkbox"/> Change securities account data in accordance with this order																																					
This section should be filled in only in case of account reopening.																																					
Number of the securities account at the Central Depository																																					
Issuer or ISIN/SIN of securities kept on the securities account																																					
Quantity of securities kept on the securities account (as specified in this order)																																					
Validation by the head of the Account Holder's executive body																																					
Position title																																					
Name																																					
Personal identification document														Series				Number				Date issued															
Signature of the head of the Account Holder's executive body																								Seal													

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Authorized representative	<input type="checkbox"/> Appointed <input type="checkbox"/> Not appointed		
Authorized representative (if any)	Name (Name of company/TIN)		
	Citizenship / Country of registration		
	Permanent (registered) address		
	Residential address (if different from the permanent address)		
	ID/state registration certificate	Series	Number
	Date of birth/state registration (dd/mm/yyyy)		<input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Other
Authorized representative (person acting on behalf of the legal entity where the client is represented by a legal entity)	Name		
	Citizenship		
	Registered address		
	Residential address (if different from the registered address)		
	Personal identification document	Series	Number
	Date of birth (dd/mm/yyyy)		<input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Other
Scope of authorities	<input type="checkbox"/> Post orders <input type="checkbox"/> Sign inquiries and applications <input type="checkbox"/> Submit documents <input type="checkbox"/> Receive account statements and references <input type="checkbox"/> Other actions (please specify)		
Term of powers			
Documents attached	<input type="checkbox"/> Document certifying state registration <input type="checkbox"/> Charter <input type="checkbox"/> Document certifying the authorities of the head of executive body <input type="checkbox"/> ID of the head of executive body <input type="checkbox"/> Proof of authorization to perform custody operations <input type="checkbox"/> Power of attorney <input type="checkbox"/> ID of authorized person <input type="checkbox"/> Other documents (please specify)		
Head of Account Holder's executive body	Authorized representative		
Signature	Signature	Seal	Seal
Date filled in			

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We confirm that we don't possess any information and/or documents other than enclosed herewith which to the best of our knowledge is required for registration of this transaction. We acknowledge that we bear all risks and responsibility in relation to possession of and failure to provide such information.

We also confirm that any and all information contained in the documents enclosed herewith is accurate and true. We acknowledge that any misrepresentation or omission of material information may result in sanctions prescribed by the Republic of Armenia legislation.