

**CORPORATE APPLICATION FORM
FOR FINANCIAL SPREAD BETTING**

You will need to hold a meeting of the Board of Directors of the Company in order to pass certain resolutions to authorise your transactions in financial spread betting with Capital Spreads. The form of these resolutions is set out in the Company Secretary's Certificate below. Once the meeting has been held and the resolutions duly passed, the Company Secretary should complete and sign the Certificate below to confirm to Capital Spreads that the resolutions have been passed. Whoever has been made an Authorised Signatory at the meeting should also sign the Certificate so that Capital Spreads will have a record of their signature(s).

Company Secretary's Certificate

I, _____ (name of company secretary)

of _____ (name of the company)

certify to Capital Spreads that the following Resolutions were duly passed by the directors of the Company

at a meeting held on _____ (date)

Resolutions of the Board of _____ (name of the company)

1. That account(s) (the "Account(s)") be opened with Capital Spreads (a division of London Capital Group) in the name of the Company for the purpose of entering into spread betting and any transactions related or ancillary to any such contracts.
2. That an agreement be entered into with Capital Spreads in connection with the opening of the Accounts in such form as Capital Spreads shall require (the "Agreement") and that all transactions entered into by the Company shall be subject to terms of the Agreement as amended from time to time.
3. That each of the persons whose names and signatures appear below (the "Authorised Signatories") shall be and are hereby jointly and severally authorised to sign any document in connection with the opening or operation of the Account(s), including (but without limitation) the Agreement and any document creating, perfecting or relating to any mortgage, charge or encumbrance over the Company's assets and to give any oral or written instructions to Capital Spreads with respect to the Account(s) including (but without limitation) instructions to effect or otherwise enter into transactions with or on behalf of the Company.

(i) _____
Print Name Title

X

Signature of authorised signatory

(ii) _____
Print Name Title

X

Signature of authorised signatory

4. That any transactions of any description whatsoever previously entered into by the Company with or through Capital Spreads be and are hereby ratified and approved.
5. That these Resolutions be communicated to Capital Spreads and shall remain in force and that Capital Spreads shall be entitled to rely on the same until an amending resolution shall be passed and a copy certified by an officer of the Company shall have been received by Capital Spreads.

I further certify that there is no legal or other reason why the Company should not conduct investment business for spread betting.

X

Signature of Company Secretary

Date

Company Details

Name of Company: _____

Registered Address: _____

Business (mailing) Address: _____

Contact Details

Telephone (office hours): _____

Telephone (out of hours): _____

Fax: _____

E-mail: _____

Approximate funds available for the Company to trade with
Capital Spreads: _____

Bank Details

Name of Bank: _____

Address of Bank: _____

Account Name: _____

Account Number: _____

Bank Sort Code (where applicable): _____

Investment Objectives (please tick where applicable)

The Company's objective is to:

- Attempt to achieve speculative gains
 Hedge against investment or trade risks

Please give a short explanation of your reasons for opening the account:

Investment Experience

Do you:

1. Understand the nature of spread betting? Yes No

2. Understand the risks of spread betting? Yes No

3. Have any relevant experience of
spread betting? Yes No

4. If the answer to Question 3 is Yes, please provide details:

a) nature and amount (months/years) of experience: _____

b) type of spread betting products you have dealt in:

- FX
 Indices
 Shares
 Other

c) did you rely on advice in relation
to these types of spread betting products? Yes No

d) average transaction size: _____

e) average number of trades per week: _____

5. Do you have relevant experience of trading in other margined
products (e.g. futures and options)? Yes No

6. If the answer to Question 5 is Yes, please provide details.

a) nature and amount (months/years) of experience: _____

b) type of margined products you have dealt in:

- FX
 Indices
 Shares
 Other

c) did you rely on advice in relation
to these types of margined products? Yes No

d) average transaction size: _____

e) average number of trades per week: _____

Statement/Confirmation Instructions

Capital Spreads do not send out any contracts or statements by post. All confirmation will be sent by electronic mail to your designated email address. We therefore require an email address and a compliance email address (where appropriate). Please supply these details below:

Email address: _____

Compliance email address: _____

Supporting Documentation

The following supporting documentation must accompany the completed account Application Form:

- Certificate of Incorporation
- Appointment of Directors
- Details of Shareholders
- Evidence of Registered Address
- Audited Financial Statements for the last three years
- Memorandum and Articles of Association
- Individual verification of two Directors and persons authorised to manage the new account (certified copy of passport and an original utility bill for each)
- Organisation chart (if the company belongs to a group).

For applications from outside of the UK, please supply notarised/certified copies of these documents.

Please help us to make the account opening process quicker by providing the documentation required. If, for some reason, you are unable to provide any of the documentation requested, please call the Customer Support on + 44 (0)20 7600 0122 to discuss alternatives.

Declarations

We have read, understand and agree to the Capital Spreads General Terms and Conditions in relation to investment business for spread betting and confirm that we have read and understood the Risk Warning Notice. We hereby agree that any money received by Capital Spreads in respect of our account with Capital Spreads shall not be treated as 'Client Money' in accordance with the Financial Services Authority's Client Money Rules and your funds will be held in a 'Non-Segregated' account. In addition we hereby acknowledge that (a) our money will not be afforded the protections conferred by the Client Money Rules (b) as a consequence, our money will not be segregated from Capital Spreads' own money and will be used by Capital Spreads in the course of its own business and (c) we will rank only as a general creditor of Capital Spreads in the event of Capital Spreads' insolvency.

Signature of director

Date

Signature of director

Date

We have read and understood the Intermediate Customer Notice that forms part of this application form which details those protections afforded to 'private customers' under the Financial Services Authority's rules that are not afforded to us, or that are modified or limited in their application to us, by reason of our categorisation as an 'intermediate customer', and, having carefully considered the implications of being categorised as an 'intermediate customer', we consent to be categorised as an 'intermediate customer'.

Signature of director

Date

Signature of director

Date

Intermediate Customer Notification

In view of your expertise and knowledge of spread betting and because you are applying for a corporate account, we have decided to classify you as an INTERMEDIATE CUSTOMER.

In view of this, we are required according to the Financial Services Authority (FSA), to notify you of the following implications of this classification and in particular, its effect on the application of certain FSA rules and regulations:

A) You will not have the protection afforded by the following Financial Services Authority rules:

COB 3. Financial promotion regulations are not applicable to intermediate customers.

COB 5.4 Capital Spreads has no obligation to ensure that you understand the risks involved.

COB 5.7 Capital Spreads has no obligation to disclose detailed information on charges, remuneration and commissions.

COB 7.10 Capital Spreads has no obligation to notify you if additional margin is required and no obligation to notify you that open positions will be closed if the margin requirement is not covered.

B) We have no obligation, in regard to confirmation of transactions, to provide you with detailed information as the separation of prices, commissions and remunerations as specified in COB 8.1 and that the periodicity of statements provided to you may be determined between you and London Capital Group Ltd and not by the regulations specified in COB 8.2.

C) The following FSA regulations are capable of modification in their application to intermediate customers:

COB 7.5 Duty of best execution. The company will not have the obligation to offer best execution.

COB 9.3 Your deposits with London Capital Group Ltd. will not be kept in segregated client money bank accounts, additionally your funds will not be kept separated from those of London Capital Group and could be used for the company in the normal conduction of its daily activities.

D) You will lose the right of access to the Financial Ombudsman Service.

E) London Capital Group Ltd may have regard to your expertise when complying with requirements under the regulatory system that communications must be clear, fair and not misleading.

Finally it is a FSA regulatory requirement that you sign this notification as evidence that you have been notified and accept the consequences of your classification as an intermediate customer.

Name

Name

Title

Title

Authorized Signatory

Authorized Signatory

Capital Spreads is a brand name of London Capital Group.

4th Floor, 12 Appold Street, London, EC2A 2AW

E-mail: admin@capitalspreads.com Telephone: 020 7600 0122 Fax: 020 7665 9498

Authorised & regulated by the Financial Services Authority (FSA).

