

Primus Investment Management Limited

Foreign Account Tax Act (FATCA) Information Form

For Institutional Customers

1. Name of Entity: _____
2. Registered Address: _____
City _____ State/Province _____ Country _____
3. Mailing Address: _____
City _____ State/Province _____ Country _____
4. Contact Details (With Country and City Code):
1. _____ 2. _____ 3. _____
5. Country of Incorporation/Registration: _____
6. Does any of the owners/partners/directors are US Citizens, US Resident or Holds US Permanent Resident Card (Green Card)? (Tick the Correct option) Yes No
(If answer of the question 6 is yes, please answer question 7, otherwise mark NA)
7. What is the percentage of shares or voting rights held by owners/directors who are US Persons? % _____, Not Applicable
8. If you are registered with Internal Revenue Service (IRS) of United States of America, kindly provide the following information;
9. U.S Taxpayer's Identification Number (TIN): _____

For Financial Institutions Only:

10. Are your registered with IRS under FATCA: (Please mark the correct option) Yes No
(If the answer of question 10 is yes, please answer question 11, otherwise go to question 12)
11. Please provide your Global Intermediary Identification Number (GIIN): _____
12. What is your current status under FATCA: _____

Declaration:

We the hereby confirm that the information provided above is true, accurate and complete. Further, we undertake to notify the Company within 30 calendar days if there is a change in any information provided to the company.

We have also read and signed the enclosed "letter of consent regarding sharing and disclosing our personal and other information".

Authorized Signatories:

Name	Signature
1.	
2.	
3.	
4.	

Date: _____

To,

Primus Investment Management Limited (PIML)

Horizon Vista, Commercial 10 Block 4, Scheme 5,

Clifton, Karachi.

Attn:

Re: Consent to PIML to use and disclose company and other information

We hereby confirm the information provided below is true, accurate and complete.

Company Name: _____

Country of Incorporation: _____

Please confirm the following:

	Yes	No
Are you a U.S. Owned Entity	—	—

We hereby provide consent to and authorize Primus Investment Management Limited or any of its affiliates including branches (collectively "PIML") in respect of the following:

(i) to disclose and furnish and share information pertaining to our account to domestic or overseas regulators or tax authorities where necessary to establish our tax liability in any jurisdiction, .

(ii) to deduct withholding tax from our account when required to do so by domestic or overseas regulators or tax authorities or pay out, from my/our account(s) such amounts as may be required according to applicable laws, regulations, agreements with regulators or authorities and directives.

We acknowledge and accept that PIML will not be required to reimburse us for any amount withheld or deducted by PIML, any affiliate, any delegate or any other person.

(iii) to comply with any obligations, requirements, policies, procedures, measures or arrangements for sharing information within the group of PIML and/or any other use of information in accordance with any group-wide programmes for compliance with sanctions or prevention or detection of money laundering, terrorist financing, fiscal evasion, avoidance of taxation or other unlawful activities.

(iv) to close, transfer or block our account if required under any applicable laws, regulations, agreements with regulators or authorities and directives.

We shall indemnify and hold PIML harmless against any claim, damages, costs, expenses and other direct and/or indirect consequence of PIML disclosing, furnishing and sharing any information pertaining to our account with any domestic or overseas regulators or tax authorities. We agree and undertake to notify PIML, immediately, if there is a change in any information which we have provided to PIML.

Further to this consent form, we agree to complete, sign and provide such additional forms as may be prescribed from time to time and required to be furnished to PIML, in relation to the consent for disclosure given herein.

I/We understand that if I/we do not consent to the disclosure and sharing of information pertaining to our account, PIML reserves the right to not accept our application for the opening of an account.

We confirm that we have obtained an express consent from the ultimate beneficiary owner of our company to your using and disclosing information for the above purposes.

Yours faithfully,

Authorized Signatories:

1. Name: _____ **Signature:** _____

2. Name: _____ **Signature:** _____

3. Name: _____ **Signature:** _____

4. Name: _____ **Signature:** _____