

**REQUEST FOR RE-CATEGORISATION FROM RETAIL TO PROFESSIONAL CLIENT**

**Warning:** The “Client Categorisation” document should be read before completing this form.

**Procedure for re-categorisation:** Please refer to “*Procedure*” (Section II.2) of the “Client Categorisation” document.

**Loss of protection of being categorised as professional:** Please refer to “*Protection of clients*” at paragraph 5 of the “Client Categorisation” document.

**Required criteria for re-categorisation:** Please refer to “*Identification criteria*” (Section II.1) of the “Client Categorisation” document.

Please answer [ = (YES),  = NO] the following questions and provide all supporting documents.

**Criterion 1**

<input type="checkbox"/>	Do you currently work or you have worked in the financial sector for at least one year in a professional position, which requires knowledge of the transactions or services envisaged? (In case the client is a legal entity this question refers to the person(s) authorised to carry out transactions on behalf of the legal entity.
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Supporting documents

<input type="checkbox"/>	Letter for current or past employer(s) stating: <ul style="list-style-type: none"> <li>▪ Position(s) held</li> <li>▪ Duties and responsibilities of above position(s)</li> <li>▪ Period of term in above position(s)</li> </ul>
<input type="checkbox"/>	Copy of professional certificate for the provision of Investment services
<input type="checkbox"/>	OTHER (please provide brief description and attached relevant documents)

**Criterion 2**

<input type="checkbox"/>	Have you carry out transactions, in significant size, on the relevant market at an average frequency of 10 per quarter over the previous four quarters?
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Supporting documents

<input type="checkbox"/>	Account(s) with DAWEDA EXCHANGE LIMITED (existing clients)
<input type="checkbox"/>	Statement of account(s) with other Investment Firm(s) for the previous four quarters
<input type="checkbox"/>	OTHER (please provide brief description and attached relevant documents)

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**Criterion 3**

<input type="checkbox"/>	Does the size of your financial instrument portfolio, defined as including cash deposits and financial instruments exceed EUR 500,000?
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**Supporting documents**

<input type="checkbox"/>	Account(s) with DAWEDA EXCHANGE LIMITED (existing clients)
<input type="checkbox"/>	Recent statement of account(s) with other Investment Firm(s)
<input type="checkbox"/>	Recent statement of account(s) with Credit Institution(s)
<input type="checkbox"/>	OTHER (please provide brief description and attached relevant documents)

**Do you wish to be treated as a professional client:**

<input type="checkbox"/>	Generally? or
<input type="checkbox"/>	in respect of a particular investment service or transaction, or type of transaction or product? (please state for which investment service or transaction, or type of transaction or product)

I hereby confirm that to the best of my knowledge the above information is complete, true and accurate.

Name: .....

Position: .....

Company name (if applicable): .....

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Signature

Date: ...../...../.....