



CastleFX powered by AFEX  
CURRENCY ACCOUNT APPLICATION



I. APPLICANT INFORMATION

Operating Name:

Address:

City:

Province:

Postal Code:

Country:

Phone:

Fax:

Email:

Company Website:

Legal Name:  same as above or

Mailing Address:  same as above or

City:

Province:

Postal Code:

Country:

Phone:

Fax:

Is your company a holding company?: Y N

Will your account be used by, or on behalf of a third party? Y N

Do you have an account with us?: Y N If yes, please provide names:

How did you hear about us?  Telpay Customer  Phone Call  Internet  Referral  Other:

II. BUSINESS INFORMATION

Business Type:  Sole Proprietor  Partnership  Corporation  Trust  Charity  Government Entity  Public Corp  Other

Business Jurisdiction:  Federal  Province \_\_\_\_\_

Business Number:

Incorporation Date:

Years in Business:

NAICS Code:

Description of your business:

Attach the following:  Articles of Incorporation, or  Business License

Are individuals listed above or transacting with CastleFX/AFEX Politically Exposed Person or Head of Int'l Organization?  Y  N

If Yes:

Politically Exposed Person (PEP) is an individual who holds or has ever held one of the following offices or positions or on behalf of a domestic or foreign country: Head of an International Organization (HIO) is a person who is either: 1. the head of an international organization established by the governments of states; or 2. the head of an institution established by an international organization.

III. BANKING INFORMATION

Full Legal Name on Account:

Financial Institution Name:

Account Manager:

Address:

City:

Province:

Postal Code:



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Country:	Phone:	Email:
Institution/Bank ID #:	Transit #:	Account #:
SWIFT Code:	Currency of Account:	
Attach a void company cheque <input type="checkbox"/>		How many authorizations do you have for this account ?:
How will you make payments/transfers? <input type="checkbox"/> PAD (Pre-Authorized Debt Agreement) or <input type="checkbox"/> I will wire funds or send funds via online banking		

**IV. FOREIGN CURRENCY CONVERSION**

Explain your currency conversion needs: \_\_\_\_\_

List countries you will be sending currencies to: \_\_\_\_\_

List countries you will be receiving currencies from: \_\_\_\_\_

Types of Trades: <input type="checkbox"/> Cash/Spot	Estimated Monthly Transactions:	Estimated Monthly Volume:
<input type="checkbox"/> Forward*	LEI Number*:	LEI Expiration Date*:

Currencies Buying:  CAD  USD  EUR  GBP  Other (please list): \_\_\_\_\_

Currencies Selling:  CAD  USD  EUR  GBP  Other (please list): \_\_\_\_\_

Company Trading Limit (in USD)      \$ \_\_\_\_\_      \* NOTE: Individual limits can be set for each user

**V. TELPAYFX ONLINE**

CastleFX Online is our free, secure and simple to use online platform for managing your currency conversions and payments. You can set up CastleFX Online users at any time, but at least one user must be selected during your account set up. If you have multiple users you will need to select the Primary Contact for payment inquiries, daily operations, call-backs and receipt of confirmations. Please note that any user listed on this application will be authorized to access the services provided by Castle Currency Exchange Inc.

**User Role Definition**

Input and Approve	Input Only	Reports Viewer	Custom Role
View Balance	View Balance	View Balance	Bespoke functionality to be determined
Submit Orders (FX trades)			
Schedule Payments			
Administer/Approve Beneficiaries	Access/Edit Beneficiaries		
View/Reprint Reports	View/Reprint Reports	View/Reprint Reports	

\*Approval required when submitting Orders/scheduling payments

**VI. VERIFICATION AND FORMS**

Attach the following:  Articles of Incorporation, or  Business License

Castle Currency Exchange Inc foreign exchange and payment transaction service is provided by AFEX. If you use the AFEX service, AFEX will pay Castle Currency Exchange Inc a referral fee.  
Sharing of customers' information - Customer understands TelpayFX will share all necessary information with AFEX. . Customer has read, understood and agreed to Castle Currency Exchange's and AFEX's Terms & Conditions,  
© 2021 Castle Currency Exchange Inc All rights reserved. © 2021 Associated Foreign Exchange, Inc. All rights reserved.

**VII. SIGNATORY INFORMATION**

Details about the individuals submitting this application on behalf of the Client (e.g., Company Officer, Director, Corporate Secretary, President, Partner, Owner, etc.).

How many authorized signatures are you wanting for this account?

<b>Authorized Signatory 1</b>		Account Primary Contact <input type="checkbox"/>		User Role:			
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship	Business Telephone
Residential Street Address		City	Province	Postal Code	Country	Email	
Identification No:		Identification Expiry Date:			Jurisdiction Where Issued:		
Attach one of the following: <input type="checkbox"/> Drivers License <input type="checkbox"/> Passport <input type="checkbox"/> Other				Individual Trading Limit (in USD)	\$		

<b>Authorized Signatory 2*</b>		*Only if Dual Authorization required		Account Primary Contact <input type="checkbox"/>		User Role:	
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship	Business Telephone
Residential Street Address		City	Province	Postal Code	Country	Email	
Identification No:		Identification Expiry Date:			Jurisdiction Where Issued:		
Attach one of the following: <input type="checkbox"/> Drivers License <input type="checkbox"/> Passport <input type="checkbox"/> Other				Individual Trading Limit (in USD)	\$		

**VIII. ADDITIONAL AUTHORIZED PARTIES AND ONLINE ACCESS USERS**

Please note that any user listed on this application will be authorized to access the services provided by Castle Currency Exchange and AFEX.

<b>User 1</b>		Account Primary Contact <input type="checkbox"/>		User Role:			
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship	Business Telephone
Residential Street Address		City	Province	Postal Code	Country	Email	
				Individual Trading Limit (in USD)	\$		



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User 2		Account Primary Contact <input type="checkbox"/>		User Role:			
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr    Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship		Business Telephone
Residential Street Address		City	Province	Postal Code	Country	Email	
		Individual Trading Limit (in USD)				\$	
User 3		Account Primary Contact <input type="checkbox"/>		User Role:			
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr    Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship		Business Telephone
Residential Street Address		City	Province	Postal Code	Country	Email	
		Individual Trading Limit (in USD)				\$	

**IX. BOARD OF DIRECTORS/ APPOINTED OFFICERS**

Please list all directors/appointed officers and complete the required information. If there are more than three Directors/Appointed Officers, please provide the below information separately.

<b>Director /Appointed Officer 1</b>		<input type="checkbox"/> same as Authorized Signatory 1		<input type="checkbox"/> Account Primary Contact		User Role:		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr    Name (First, Middle, Last)		Occupation		Date of Birth		Citizenship		Telephone
Residential Street Address		City	Province	Postal Code	Country	Email		
						Individual Trading Limit (in USD)		\$
<b>Director /Appointed Officer 2</b>		<input type="checkbox"/> same as Authorized Signatory 2		<input type="checkbox"/> Account Primary Contact		User Role:		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr    Name (First, Middle, Last)		Occupation		Date of Birth		Citizenship		Telephone
Residential Street Address		City	Province	Postal Code	Country	Email		
						Individual Trading Limit (in USD)		\$
<b>Director /Appointed Officer 3</b>		<input type="checkbox"/> same as User 1		<input type="checkbox"/> Account Primary Contact		User Role:		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr    Name (First, Middle, Last)		Occupation		Date of Birth		Citizenship		Telephone
Residential Street Address		City	Province	Postal Code	Country	Email		
						Individual Trading Limit (in USD)		\$
<b>Director /Appointed Officer 4</b>		<input type="checkbox"/> same as User 2		<input type="checkbox"/> Account Primary Contact		User Role:		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr    Name (First, Middle, Last)		Occupation		Date of Birth		Citizenship		Telephone
Residential Street Address		City	Province	Postal Code	Country	Email		
						Individual Trading Limit (in USD)		\$

**X. LIST BENEFICIAL OWNERS**

If publicly listed skip this section

Please complete the below for each natural person who, directly or indirectly, owns or controls 25% or more of the Client. Beneficial owners cannot be another legal entity; they must be the natural persons that, through direct ownership, or through indirect influence or control, such as trustee, power of attorney, or other position of authority or influence over an owner of Client including an informal arrangement with an owner, are able to exercise control over the Client. If there is no individual who maintains at least 25% ownership and/ or control, please enter the individual with the largest percentage of ownership. You must list at least one natural person. If there are more than three beneficial owners, please provide the below information for each additional beneficial owner on a separate page.

Owner 1	<input type="checkbox"/> same as Director/Appointed Officer 1		Account Primary Contact <input type="checkbox"/>		User Role:	
% Ownership	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship
Residential Street Address		City	Province	Postal Code	Country	
					Individual Trading Limit (in USD)	\$
Owner 2	<input type="checkbox"/> same as Director/Appointed Officer 2		Account Primary Contact <input type="checkbox"/>		User Role:	
% Ownership	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship
Residential Street Address		City	Province	Postal Code	Country	
					Individual Trading Limit (in USD)	\$
Owner 3	<input type="checkbox"/> same as Director/Appointed Officer 3		Account Primary Contact <input type="checkbox"/>		User Role:	
% Ownership	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship
Residential Street Address		City	Province	Postal Code	Country	
					Individual Trading Limit (in USD)	\$
Owner 4	<input type="checkbox"/> same as Director/Appointed Officer 4		Account Primary Contact <input type="checkbox"/>		User Role:	
% Ownership	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr Name (First, Middle, Last)		Occupation		Date of Birth	Citizenship
Residential Street Address		City	Province	Postal Code	Country	
					Individual Trading Limit (in USD)	\$

**TERMS AND CONDITIONS**

Client enters into this Account Application and Agreement (“Agreement”) with Castle Currency Exchange Inc, (“CCFX”) solely acting as an introducer and providing an electronic trading platform to connect to our trading partner, Associated Foreign Exchange, ULC (“AFEX”) acting as the currency dealer as of the date this document is executed by Client. Client is also required to accept AFEX’s TERMS AND CONDITIONS.

**1. DEFINITIONS**

- 1.1. Whenever used in this Agreement, unless inconsistent with the subject matter or context, the following terms shall have the following meanings:
- 1.2. “CCFX” means Castle Currency Exchange Inc. CastleFX means the online platform of Castle Currency Exchange Inc
- 1.3. “AFEX” means the AFEX group of related companies, including parents, subsidiaries and affiliates, including, without limitation, AFEX ULC and AFEX Inc.
- 1.4. “Client” means the party entering into this Agreement with CCFX and AFEX.
- 1.5. “Services” means CCFX’s provision of an electronic trading platform and AFEX’s provision of various foreign exchange, settlement and delivery products and services, including without limitation, risk management and hedging services.

**2. CONDUCTING BUSINESS WITH CCFX**

- 2.1. Agreement. This Agreement shall apply to allowable currency transactions facilitated through the Castle Currency Exchange online platform or phone communications directly to our trading partner AFEX.
- 2.2. Provision of Services. CCFX is solely acting as an introducer and providing an electronic trading platform to facilitate a connection to our Partner AFEX. AFEX is responsible for the currency transactions and fund remittance.
- 2.3. NO SPECULATIVE TRADING, DERIVATIVES, OR OPTIONS Client acknowledges and agrees that it is forbidden to conduct any trades for speculative purposes. Additionally, trading of options or derivatives is strictly prohibited under this agreement.
- 2.4. Trade Summary. Upon Client’s execution and AFEX’s acceptance of an Order, CCFX may issue a Trade Summary to Client. The Trade Summary is for informational purposes, a Trade Confirmation will be sent directly from AFEX.
- 2.5. Fees. Client understands CCFX will receive a revenue sharing fee for facilitating the online platform and managing the client.
- 2.6. Errors and Discrepancies. CCFX’s role will be to assist client and AFEX in its efforts of any reported errors.
- 2.7. Terms & Conditions Applies to CCFX. Client acknowledges and agrees that the following AFEX Terms & Conditions also apply to CCFX:
  - 2.7.1. Section 2.6 - No Advice
  - 2.7.2. Section 2.7 - Information Sources
  - 2.7.3. Section 14 – Online System
    - 2.7.3.1. Note: The Online System will be provided by CCFX.
  - 2.7.4. Section 15 – Online System Security
  - 2.7.5. Section 16 – Intellectual Property
  - 2.7.6. Section 18 – TERM, SUSPENSION AND TERMINATION
  - 2.7.7. Section 19 - REPRESENTATIONS AND WARRANTIES
  - 2.7.8. Section 21 - USE OF INFORMATION, PRIVACY AND DISCLOSURE
    - 2.7.8.1. Note: Privacy Policy is available on website at www.telpayfx.com
  - 2.7.9. Section 22.1 – LIMITATION OF LIABILITY
    - 2.7.9.1. Note: No Liability for CCFX. CCFX and its representatives’ have no liability under this Agreement provided it has used its best efforts in providing its service.
  - 2.7.10. Section 22.4 – Indemnity
  - 2.7.11. Section 23 – COMMUNICATION AND NOTICES
  - 2.7.12. Section 24 – DISPUTE RESOLUTION
  - 2.7.13. Section 25 – TERMS OF MEDIATION
  - 2.7.14. Section 26 – GENERAL TERMS AND CONDITIONS

**XII. DECLARATIONS**

- I certify I have obtained the consent of the individuals whose personal information is provided on this document, where the information is not otherwise accessible from a public source.
- I certify I have the authority to provide the information on this document and to verify its truth and accuracy.
- I certify that all statements contained in this Agreement, and any other information contained in documentation submitted in support of this Agreement, are true and correct.
- I have read, understood and agree to the above terms and conditions.
- I have received, read, understood and agree to the AFEX terms and conditions.
- I have the authority to enter into this Agreement on behalf of the Client and to bind the Client to the terms of this Agreement.
- I agree it is my responsibility to make an initial test or a small partial payment to each new beneficiary and ensure it properly reaches its destination.
- I confirm that I have requested this Agreement and all related documents to be drawn up in the English language only. Je confirme avoir exigé que ce contrat et tous les documents s'y rapportant soient rédigés en Anglais.

Full Legal Name of Client:

**Signatory 1**

Full Legal Name of Signatory:

Job Title:

Signature:

Date:

**Signatory 2**

Full Legal Name of Signatory:

Job Title:

Signature:

Date: