

**Section A:**

A/C Name:	A/C Email:	
Please select your requested categorisation by placing an "X" in the relevant box:	Retail Client	
	Elective Professional Client	
	Eligible Counterparty	
<input type="checkbox"/> By ticking this box, I confirm that I fully accept to be treated as a Professional Client in <b>All services/transactions</b> XSpot is offering.		
<input type="checkbox"/> By ticking this box, I confirm that I fully accept to be treated as a Professional Client in respect of a <b>particular service/ transaction</b> XSpot is offering. (please mention) _____		

**Section B:**

If you have selected "Professional Client" above, please select two or more of the following qualification criteria which apply to you:

1.	<p>You have carried out transactions, in significant size, on a relevant financial product at an average frequency of 10 per quarter over the previous four quarters.</p> <p><i>*Please submit proof of transactions such as an account ledger issued during the latest year. (this is not required for periods of time where you have been trading with XSpot.</i></p>	
2.	<p>The size of your financial instrument portfolio, defined as including cash deposits and financial instruments, exceeds EUR 500,000.</p> <p><i>*Please submit proof of your investment portfolio such as a bank statement or an account ledger issued within the past month.</i></p>	
3.	<p>You work or have worked in the financial sector for at least one year in a professional position, which requires knowledge of the transactions or services envisaged.</p> <p><i>*Please submit proof of your employment in the financial sector and provide below the detailed description of your professional experience Company/Department/Period of employment/Job title or position) and how it gave you exposure to derivatives or leveraged FX and CFD trading services.</i></p>	

**Section C:**

(Complete this section only if you have selected Section B.3.)

Details of Professional Experience:
Company Name :
Position and description of responsibilities at a Company:
Period of employment at company:

**Section D:**

1. By submitting this request, **YOU HEREBY ACKNOWLEDGE AND CONFIRM** the following:
  - a. The CIF has duly informed you in due time of your current categorization, as well as of your right to request to be categorized as Professional client.
  - b. You have read and understood the CIF's [Client Categorisation Policy](#), which has been provided to you during the account opening process and which is also uploaded on the CIF's website.
  - c. The CIF has advised you beforehand, through this form and its [Client Categorisation Policy](#), of the implications that a change in categorization from Retail to Professional client could have on the protections afforded to you under the Law.
  - d. You are aware of the consequences of losing those protections and still wish to proceed with this application.
2. **YOU ACKNOWLEDGE** that for changes in category from Retail to Professional, the CIF needs to be in possession of data that will justify compliance with the conditions set down in Part II of the Second Appendix of [the Law 87\(I\)/2017](#). In this respect, YOU CONFIRM that you shall provide the Company with any additional information/ documentation as reasonably requested/ required.
3. **YOU ACKNOWLEDGE AND ACCEPT** that any false data provided by you to the Company to justify the requested change of classification will release the Company from any liability related to the adaptation of the protection measures set down in the Law to the new classification obtained based on the false information that may have been provided.
4. **YOU ACKNOWLEDGE** that the CIF shall always act in the best interest of its clients. In this respect, the Company reserves the right to decline any request for change in categorization and shall decline such request where the relevant conditions/ criteria under the Law (as these are also described in Section II of the Company's [Client Categorisation Policy](#)) are not fulfilled.

**CONSENT****WARNING**

BY SIGNING THIS DOCUMENT, YOU, THE "CLIENT", REQUEST A CHANGE IN THE CLASSIFICATION ASSIGNED TO YOU FOR YOUR RELATIONSHIP WITH THE COMPANY WITHIN THE SCOPE OF THE [LAW 87\(I\)/2017](#). PLEASE BE WARNED THAT RETAIL CLIENTS ENJOY THE HIGHEST LEVEL OF INVESTOR PROTECTION PROVIDED BY LAW.

A CHANGE IN CATEGORISATION FROM RETAIL TO PROFESSIONAL CLIENT INVOLVES LIMITATIONS WITH RESPECT TO THE PROTECTIONS AFFORDED TO THE CLIENT UNDER THE LAW. PLEASE REFER TO SECTION IV OF THE COMPANY'S CLIENT CATEGORISATION POLICY FOR A COMPREHENSIVE DESCRIPTION OF THE PROTECTIONS/ COMPENSATION RIGHTS YOU WILL LOSE FOLLOWING A CHANGE OF YOUR CLASSIFICATION FROM RETAIL TO A PROFESSIONAL CLIENT.

Name:

Signature:

Date: