

Registration To Operate Omnibus Account

Request Date:

Name of Omnibus Account:

Existing NIN (if applicable):

Nationality of Existing NIN (please select an option): Local GCC Foreign

Member Code submitting the request:

Additional NINs required (please indicate Y/N):

Nationality Group	Yes / No		NIN assigned (to be completed by DCSD)
Local	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
GCC	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Foreign	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Note: The following applicable supporting document must be submitted with this application: A certified true copy of:
 1. In case of local UAE entities: SCA License;
 2. In case of foreign entities: License by an Equivalent Regulatory Authority.

DECLARATION AND UNDERTAKING

By signing this Registration to Operate Omnibus Account Form, the Omnibus Account Operator acknowledges and agrees that, throughout the period during which the Omnibus Account NIN is open, I/we: will comply with the Dubai CSD Rules and Procedures, and any amendments there to; All data, information and attached documents in this form are correct, complete, accurate and updated and in the event of any changes thereto I/we shall immediately notify Dubai CSD; Discharges the Dubai CSD, its board of directors, directors, officers, mother companies, and subsidiaries thereof from any liability, claims, losses, compensations, actions, or liability towards any person or entity, resulting directly or indirectly from the registration and operation of the Omnibus Account. That the person who signed this Form is legally authorized to do so.

SIGNATURE:

NAME OF AUTHORIZED SIGNATORY OF THE OMNIBUS ACCOUNT OPERATOR OR CUSTODIAN: (COMPANY STAMP, IF APPLICABLE)

TO BE COMPLETED BY DCSD/DFM

	Local NIN	GCC NIN	Foreign NIN
NIN			
Name			
CDS Account Number			

Dubai CSD Section:

Prepared by:
 Name: Initials: Date:

Checked by:
 Name: Initials: Date:

Approved by:
 Name: Initials: Date:

DFM Section:

Prepared by:
 Name: Initials: Date:

Checked by:
 Name: Initials: Date:

Approved by:
 Name: Initials: Date: