

LOLC Finance PLC

100/1 Sri Jayawardenapura Mawatha Rajagiriya

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APPLICATION FOR MARGIN TRADING FACILITY  
(INDIVIDUALS)

Credit Limit Required : .....

Last Name with Initials : .....

Other Names : .....

Profession / Occupation : .....

Name & Address of Employer (if any) : .....

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Telephone No's. (Office) : .....

NIC / Passport No. : ..... Nationality .....

Residential Address : .....

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Telephone Nos : .....

Fax Nos. : .....

Email Addresses .....

CDS Account No(s) : .....

PARTICULARS OF SPOUSE

Husband/Wife

Last Name with Initials : .....

Other Names : .....

Profession / Occupation : .....

Name & Address of Employer (if any) : .....

.....

Telephone No's. (Office) : .....

NIC / Passport No. : ..... Nationality .....

Residential Address : .....

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Telephone Nos : .....

Fax Nos. : ..... Email Addresses : .....

CDS Account No(s) : .....

Bankers :

Bank	Branch	Type of Account	Account No

Particulars of Other Margin Trading Facilities

Name of Margin Provider	Outstanding Liability	Market Value of Security

Particulars of Other Liabilities / Facilities

Name of Bank / Financier	Original Amount	Balance Outstanding	Balance Period	Security

DOCUMENT TO BE ATTACHED

Please  X the documents attached

Portfolio statements of quoted companies kept as security with the stockbroker.

Portfolio statements of quoted companies to be (remaining) at other broking firms and in Certificates.

Copy of National Identity Card / valid Passport No.

I hereby declare that the information furnished in this Application and the attached documents are and correct in all respects. I understand that this Application and the attached documents remain the property of LOLC Finance PLC whether the facility is granted or not and LOLC Finance PLC reserves the right to reject at its absolute discretion this Application without assigning any reasons thereof.

Date :.....

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Signature of Applicant