



DBTCA Deposit Account Opening Application

**Private Wealth Premium™
Elite Personal Accounts**

- Checking Acct. # _____
- Elite Checking with Interest
Acct. # _____
APY _____
- Elite Money Market Deposit
Acct. # _____
APY _____
- Certificate of Deposit
Acct. # _____
APY _____
Term _____
- DB AG NY Preferred Certificate of Deposit
Acct. # _____
APY _____
Term _____
Promo term _____
(DBTCA deposit account required, along with a DB AG Preferred Terms and Conditions)

**Private Wealth Premium™
Internet Banking Services**

- DB Private Wealth Online Plus
- Link to Existing Online Relationship

(User/Co. ID Number)

**Private Wealth Premium™
Elite Business Accounts**

- Checking Acct. # _____
- Elite Checking with Interest
Acct. # _____
APY _____
- Elite Money Market Deposit
Acct. # _____
APY _____
- Certificate of Deposit
Acct. # _____
APY _____
Term _____
- DB AG NY Preferred Certificate of Deposit
Acct. # _____
APY _____
Term _____
Promo term _____
(DBTCA deposit account required, along with a DB AG Preferred Terms and Conditions)

- Cash Master Sweep Account
Checking Acct. # _____
Elite Money Market Deposit
Acct. # _____
APY _____
Target Amount _____
Trigger Amount _____

**Private Wealth Premium™
Banking Services**

- Consumer Debit Card # _____
- Joint Applicant Debit Card # _____
- Business Debit Card # _____
- Deluxe Checkbook Style #
Wallet standard Blue
- Name Only
- Name and Address
- Duplicate Statement
Addr _____
City _____
State _____ Zip Code _____
- Mailing address (if different)
Name _____
Addr _____
City _____
State _____ Zip Code _____

Client Relationship

- Individual Account
- Joint Tenants with Right of Survivorship
- Joint Tenants in Common
- In Trust For/Payable on Death/As Trustee for
- Trust
- Estate
- Custody under NY UTMA
- Foundation
- Non-Profit Organization
- Attorney Trust Escrow
- Landlord Master Escrow
- Corporation
- Limited Liability Company
- Partnership
- Limited Liability Partnership

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013E | 0.032613

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Account Title and Joint Application Information

Name of Account Title
(last name of individual or business)

Social Security Number or Taxpayer ID Number

Address

City, State and Zip Code

Home Telephone Number

Business Telephone Number

Date of Birth

Name of Employer

Address

City, State and Zip Code

Karena Shukla

Joint Applicant
(last name)

Social Security Number or Taxpayer ID Number

Address
New York NY 10065

Home Telephone Number

Business Telephone Number

Date of Birth
STUDENT

Name of Employer

Address

City, State and Zip Code

Notice of Customer Identification Policy

Important Information

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who establishes an account, investment or other business relationship with a financial institution. This means that we will ask for your name, address, and other information that will allow us to identify you. We may also ask to see identifying documents such as a certificate of formation or good standing (legal entities) or a passport or other photo identification (individuals).

3rd EU Notice

Governmental rules have also broadened the scope of the Bank's obligations to aid in the fight against money laundering and terrorist financing; these rules call for an active involvement of both asset management firms and their clients. For new and existing clients we currently have a legal obligation to ask our customers questions regarding their identities, addresses, source of funds and, if necessary, legal representatives, authorized signatories, beneficial owners or control structures and to collect requisite documentation to substantiate the information. Also, enhanced anti-money laundering requirements require that should any of the above personal or institutional information change, our clients would be obliged to immediately notify us of the change(s) and provide us with relevant documentation to verify these changes.

Telephone, Facsimile or Email Instructions

By signing below, you agree that from time to time you may give instructions by telephone, facsimile or email regarding the above captioned account(s) (defined herein as "Verbal Instructions"). It is understood that the risk of Verbal Instructions being given by person or persons purported to be you is your own. Absent the gross negligence or willful misconduct of Deutsche Bank Trust Company Americas (DBTCA), you agree to indemnify and hold harmless DBTCA for any claims, losses, expenses, costs or attorneys' fees resulting from DBTCA's acting upon such misunderstood and unauthorized Verbal Instructions. You understand that DBTCA may, but shall not be required to, seek verification of your verbal, facsimile or email instructions by call back. In case of doubt, DBTCA may in its sole discretion refuse to execute your Verbal Instructions or any part thereof, without incurring any liability. DBTCA is under no obligation to execute your Verbal Instructions to transfer funds or securities to any account(s) without written instructions bearing your original signature.

Joint Account Disclosure

You have opened a joint account with DBTCA and acknowledge receipt of the following information: This deposit and any additions to the account shall become the property of each owner as joint tenants, and DBTCA may release the entire account to any owner during the lifetime of all owners. DBTCA may honor checks, orders or withdrawal requests from any owner during the lifetime of all owners. The Bank may be required by service of legal process to remit funds held in the joint account to satisfy a judgment entered against, or other valid debt incurred by, any owner of the account. DBTCA may honor checks, orders or withdrawal requests from the survivor(s) after the death of any owner(s) and may treat the account as the sole property of the survivor(s) after the death of any owner(s). Unless DBTCA receives written notice signed by any owner not to pay or deliver any joint deposit or addition or accrual, DBTCA shall not be liable to any owner for continuing to honor checks, orders or withdrawal requests from any owner. After the receipt of the notice referred to in the previous sentence, DBTCA may require the written authorization of any or all joint owners for any further payments or deliveries.

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ATM/Debit Service

You agree that the retention or use of the ATM/Debit card constitutes acceptance of the terms and conditions of the Cardholder Agreement contained in the Terms and Conditions of Deposit Accounts.

Internet Banking Service

If you have selected to receive Internet Banking Services, you understand that you will be required to enter into a separate Internet Banking Services Agreement with DBTCA before you can access the Internet Banking Service.

Acknowledgement of Receipt of Privacy Notice

By signing below, you acknowledge receipt of DBTCA's Privacy Notice included in the Application Package.

Non-US Individuals: Confirmation of Tax and Compliance Responsibilities.

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to you in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA.

Non-US Organizations: Confirmation of Tax and Compliance Responsibilities.

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to it in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA. Furthermore, you confirm that the necessary information (to the best of your knowledge and capabilities) is made available no less than annually to the relevant beneficial owner(s), settlor(s) beneficiary(ies), partner(s), etc. to enable him/her/ them to fulfill any respective tax obligations that may arise for him/her/ them in connection with your business relationship with DBTCA.

Please complete and attach separate W-8 or W-9 documentation as applicable.

Terms and Conditions and Representations

By signing below, you acknowledge receipt of the Terms and Conditions for Deposit Accounts attached to this Application and agree to be bound by them. In addition, you agree to notify us immediately of any material changes to the information provided by you on this Application.

You represent and warrant that all of the information provided by you on this Application is accurate.

The Terms and Conditions for Deposit Accounts are subject to change.

Acceptance

You understand that this application is subject to acceptance by DBTCA.

	Date	11/27/2013
 	Date	11/22/2013

For Bank Use Only Reviewed by:

Name [Signature]

Title RC

Date 12/10/13

Accepted by DBTCA:

Name [Signature]

Title MD

Date 12/12/13

Accepted by DBTCA:

Name [Signature]

Title Director NOC

Date _____

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