

ACCOUNT APPLICATION

Broker Name/#: _____

TYPE OF REGISTRATION					
PRIMARY APPLICANT INFORMATION	<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> JOINT TENANTS IN COMMON	<input type="checkbox"/> SOLE PROPRIETORSHIP	<input type="checkbox"/> OTHER _____	
	<input type="checkbox"/> ESTATE	<input type="checkbox"/> TENANTS BY ENTIRETY	<input type="checkbox"/> PARTNERSHIP		
	<input type="checkbox"/> TRUST	<input type="checkbox"/> COMMUNITY PROPERTY	<input type="checkbox"/> INVESTMENT CLUB		
	<input type="checkbox"/> JOINT WITH RIGHTS OF SURVIVORSHIP	<input type="checkbox"/> CUSTODIAN (UNIFORM GIFT TO MINORS) UGMA/UTMA	<input type="checkbox"/> CORPORATION		
FULL NAME <input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS <input type="checkbox"/> MS.					
DATE OF BIRTH	SOCIAL SECURITY OR TAX ID #	HOME PHONE	CELL PHONE	EMAIL ADDRESS	
USA Patriot Act Information (Required by Federal Law) All applicants must provide the information below. Non-resident aliens must also include a completed W-8.					
CITIZENSHIP:	<input type="checkbox"/> US <input type="checkbox"/> NON-RESIDENT ALIEN <input type="checkbox"/> RESIDENT ALIEN	DRIVERS LICENSE OR PASSPORT #	STATE	ISSUE DATE <small>(mm/dd/yyyy)</small>	EXP. DATE <small>(mm/dd/yyyy)</small>
RESIDENCE ADDRESS		CITY	STATE	ZIP	
MAILING ADDRESS (IF DIFFERENT THAN ABOVE)		CITY	STATE	ZIP	
EMPLOYER NAME AND ADDRESS (IF RETIRED, PROVIDE PREVIOUS EMPLOYER)			OCCUPATION/TYPE OF BUSINESS	BUS. PHONE	
JOINT APPLICANT INFORMATION	FULL NAME <input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS <input type="checkbox"/> MS.				
DATE OF BIRTH	SOCIAL SECURITY OR TAX ID #	HOME PHONE	CELL PHONE	EMAIL ADDRESS	
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MAILING ADDRESS (IF DIFFERENT THAN ABOVE)		CITY	STATE	ZIP	
EMPLOYER NAME AND ADDRESS (IF RETIRED, PROVIDE PREVIOUS EMPLOYER)			OCCUPATION/TYPE OF BUSINESS	BUS. PHONE	
CUSTOMER SUITABILITY					
ACCOUNT SOURCE: <input type="checkbox"/> SOLICITED <input type="checkbox"/> WALK-IN <input type="checkbox"/> PERSONAL ACQUAINTANCE <input type="checkbox"/> ADVERTISEMENT <input type="checkbox"/> LEAD LIST <input type="checkbox"/> REFERRAL <input type="checkbox"/> EXISTING CLIENT <input type="checkbox"/> OTHER _____					
INVESTMENT OBJECTIVES		RISK TOLERANCE		INVESTMENT EXPERIENCE (INDICATE NUMBER OF YEARS)	
<input type="checkbox"/> INCOME <input type="checkbox"/> CAPITAL APPRECIATION <input type="checkbox"/> TAX-ADVANTAGED INCOME <input type="checkbox"/> SPECULATION <input type="checkbox"/> GROWTH AND INCOME		<input type="checkbox"/> CONSERVATIVE <input type="checkbox"/> MODERATE <input type="checkbox"/> HIGH-AGGRESSIVE <input type="checkbox"/> VERY HIGH/SPECULATIVE <input type="checkbox"/> COMBINATION _____		<input type="checkbox"/> EQUITIES <input type="checkbox"/> GOVT SEC <input type="checkbox"/> OPTIONS <input type="checkbox"/> ANNUITIES <input type="checkbox"/> MUTUAL FUNDS <input type="checkbox"/> CDs <input type="checkbox"/> TAX-FREE BONDS <input type="checkbox"/> MARGIN <input type="checkbox"/> CORPORATE BONDS <input type="checkbox"/> REITS <input type="checkbox"/> COMMODITIES <input type="checkbox"/> LTD PSHIP	
INVESTMENT KNOWLEDGE		TIME HORIZON		TAX BRACKET	
<input type="checkbox"/> EXPERT <input type="checkbox"/> HIGH <input type="checkbox"/> MODERATE <input type="checkbox"/> LOW <input type="checkbox"/> NOVICE		<input type="checkbox"/> 0 - 2 YEARS <input type="checkbox"/> 2 - 5 YEARS <input type="checkbox"/> 5 YEARS BUT LESS THAN 10 <input type="checkbox"/> 10 YEARS OR LONGER <input type="checkbox"/> COMBINATION _____		FEDERAL _____ %	
ACCOUNT FUNDING SOURCE					
<input type="checkbox"/> ASSET APPRECIATION <input type="checkbox"/> BUSINESS REVENUE <input type="checkbox"/> INHERITANCE <input type="checkbox"/> LEGAL/INSURANCE SETTLEMENT <input type="checkbox"/> SALE OF ASSETS (list below): _____ <input type="checkbox"/> SAVINGS FROM EARNINGS <input type="checkbox"/> RETIREMENT - ROLLOVER <input type="checkbox"/> RETIREMENT - TRANSFER <input type="checkbox"/> 1035 EXCHANGE <input type="checkbox"/> NONQUALIFIED TRANSFER <input type="checkbox"/> OTHER: _____					

CUSTOMER SUITABILITY (cont.)

NET WORTH		ANNUAL INCOME		LIQUID ASSETS	
<input type="checkbox"/> \$0 - \$ 24,999	<input type="checkbox"/> \$100K - \$149,999	<input type="checkbox"/> \$0 - \$ 24,999	<input type="checkbox"/> \$100K - \$149,999	<input type="checkbox"/> \$0 - \$ 24,999	<input type="checkbox"/> \$100K - \$149,999
<input type="checkbox"/> \$25K - \$49,999	<input type="checkbox"/> \$150K - \$249,999	<input type="checkbox"/> \$25K - \$49,999	<input type="checkbox"/> \$150K - \$249,999	<input type="checkbox"/> \$25K - \$49,999	<input type="checkbox"/> \$150K - \$249,999
<input type="checkbox"/> \$50K - \$74,999	<input type="checkbox"/> \$250K - \$499,999	<input type="checkbox"/> \$50K - \$74,999	<input type="checkbox"/> \$250K - \$499,999	<input type="checkbox"/> \$50K - \$74,999	<input type="checkbox"/> \$250K - \$499,999
<input type="checkbox"/> \$75K - \$99,999	<input type="checkbox"/> \$500K+	<input type="checkbox"/> \$75K - \$99,999	<input type="checkbox"/> \$500K - OVER	<input type="checkbox"/> \$75K - \$99,999	<input type="checkbox"/> \$500K - OVER
If over \$500K, List amount \$ _____		If over \$500K, List amount \$ _____		If over \$500K, List amount \$ _____	

ASSETS HELD AWAY – Provide total value of assets held away and percentages for each type of asset. Total of all percentages must equal 100%.

Total value of assets held away: \$ _____

STOCKS _____%	OPTIONS _____%	ANNUITIES _____%	BANK ACCT _____%
BONDS _____%	LIMITED PARTNERSHIPS _____%	ALTERNATIVE INVESTMENTS _____%	OTHER _____%
SHORT-TERM _____%	VARIABLE CONTRACTS _____%	FOREIGN CURRENCY _____%	(specify below)
MUTUAL FUNDS _____%	REITS _____%	FOREIGN SECURITY _____%	TOTAL _____%

BACK-UP CONTACT INFORMATION: This section should be completed with information for another contact person should we not be able to reach you due to return mail for your address or a disconnected phone number. You authorize us to contact the person listed below and to disclose information about you in order to confirm the specifics of your current contact information, health status, and the identity of any legal guardian, trustee, or holder of a power of attorney. This does not grant your back-up contact authorization over your account.

FULL NAME <input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS <input type="checkbox"/> MS.			
RESIDENCE ADDRESS	CITY	STATE	ZIP
WORK PHONE	HOME PHONE	MOBILE PHONE	EMAIL ADDRESS
RELATIONSHIP TO PRIMARY ACCOUNT HOLDER/JOINT ACCOUNT HOLDER			

- YES NO ARE YOU ASSOCIATED WITH A STOCK EXCHANGE OR FINRA MEMBER FIRM?
- YES NO ARE YOU RELATED TO AN EMPLOYEE OF THIS BROKER-DEALER? IF YES, NAME _____ RELATIONSHIP _____
- YES NO ARE YOU A POLICY-MAKING OFFICER, DIRECTOR, OR 10% STOCKHOLDER OF ANY PUBLICLY TRADED COMPANY? (FORM 144 IS REQUIRED FOR THE SALE OF THESE SECURITIES) IF YES, NAME OF COMPANY _____

Under penalties of perjury, I certify that:

- (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest of dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- (3) I am a U.S. person (including a U.S. resident alien).

Customer Acknowledgement Agreement

All securities and investment products are offered to the undersigned by this registered broker-dealer, member FINRA/SIPC. Annuities are offered through various third parties.

I have reviewed the above information and certify that it is correct. I understand that you rely on it to advise me concerning investments. I agree to notify you if any of the information should change which could alter my/our investments or financial situation.

I/we acknowledge receipt of PAGE 3 of this application titled Arbitration Agreement which contains a pre-dispute arbitration clause requiring all disputes between ourselves and Southeast Investments to be settled by binding arbitration. By signing below I/we acknowledge I/we have received, read, understand, and agree to such arbitration provisions and also acknowledge receiving a copy of the agreement.

All persons must sign if this is a joint account.

X _____
APPLICANT'S SIGNATURE DATE

X _____
APPLICANT'S SIGNATURE DATE

X _____
REGISTERED REPRESENTATIVE'S SIGNATURE DATE

X _____
PRINCIPAL APPROVAL DATE

Arbitration Agreement

Resolving Disputes – Arbitration

This agreement contains a pre-dispute arbitration clause. Under this clause, which becomes binding on all parties when you sign your account application, you and Southeast Investments, N.C. Inc. agree as follows:

- A. All parties to this agreement are giving up the right to sue each other in court, including the right to a trial by jury, except as provided by the rules of the arbitration forum in which a claim is filed.
- B. Arbitration awards are generally final and binding; a party's ability to have a court reverse or modify an arbitration award is very limited.
- C. The ability of the parties to obtain documents, witness statements, and other discovery is generally more limited in arbitration than in court proceedings.
- D. The arbitrators do not have to explain the reason(s) for their award.
- E. The panel of arbitrators will typically include a minority of arbitrators who were or are affiliated with the securities industry.
- F. The rules of some arbitration forums may impose time limits for bringing a claim in arbitration. In some cases, a claim that is ineligible for arbitration may be brought in court.
- G. The rules of the arbitration forum in which the claim is filed, and any amendments thereto, shall be incorporated into this agreement.

All controversies that may arise between you and Southeast Investments, N.C. Inc. concerning any subject matter, issue or circumstance whatsoever (including, but not limited to, controversies concerning any account, order or transactions or the continuation, performance, interpretation or breach of this or any other agreements between you and Southeast Investments, N.C. Inc., whether entered into or arising before, on or after the date this account is opened) shall be determined by arbitration in accordance with the rules then prevailing of the Financial Industry Regulatory Authority (FINRA) or any securities self-regulatory organization or securities exchange of which the person, entity or entities against whom the claim is made is a member, as you may designate. If you designate the rules of a self-regulatory organization or securities exchange and those rules fail to be applied for any reason then you shall designate the prevailing rules of any other securities self-regulatory organization or securities exchange of which the person, entity or entities against whom the claim is made is a member. If you do not notify us in writing of your designation with five (5) days after such failure or after you receive from us a written demand for arbitration, then you authorize Southeast Investments, N.C. Inc. to make such designation on your behalf. The designation of the rules of a self-regulatory organization or securities exchange is not integral to the underlying agreement to arbitrate. You understand that judgment upon any arbitration award may be entered in any court of competent jurisdiction.

No person shall bring a putative or certified class action to arbitration, nor seek to enforce any predispute arbitration agreement against any person who has initiated in court a putative class action; or who is a member of a putative class action who has not opted out of the class with respect to any claims encompassed by the putative class action until: (i) the class certification is denied; or (ii) the class is decertified; or (iii) the customer is excluded from the class by the court. Such forbearance to enforce an agreement to arbitrate shall not constitute a waiver of any rights under this agreement except to the extent stated herein.

FINRA's BrokerCheck Hotline

FINRA's BrokerCheck Hotline provides certain information regarding the disciplinary history of FINRA members and their associated persons in response to written inquiries, electronic inquiries, or telephonic inquiries via FINRA's (1) toll-free telephone listing (1-800-289-9999), or (2) website (www.finra.org). Additionally, FINRA has prepared an investor brochure that includes information describing BrokerCheck