## **UOB KAY HIAN SECURITIES (M) SDN BHD**

(Registration No. 199001003423 (194990-K))

A Participating Organisation of Bursa Malaysia Securities Berhad

A Trading Participant of Bursa Malaysia Derivatives Berhad A Registered IUTA and IPRA of Federation of Investment Managers Malaysia

: www.utrade.com.my

APPLICATION FORM FOR INSTITUTION / CORPORATION / ASSOCIATION APPLICANT								
1 APPLICANT PARTICULARS								
Name of Institution / Corporation / Organisation / Association (As per Registration documents)								
Date of Incorporation (dd/mm/yyyy) Registration No.								
Registered Address as per Form 44/ Section 46/ Other Equivalent Constituent Documents ( <i>Please tick</i> )								
Correspondence Address/ Business Address if different from Registered Address:								
Postcode Postcode								
Telephone No.								
Fax No. ☐ Country of Phone No. ☐ Malaysia ☐ US ☐ Others								
E-mail Address (Compulsory for new applicant)								
Company Website								
Important Information as Required Under FATCA/ CRS								
1. Country of Incorporation In								
2. Ownership								
3. Is the Applicant a Malaysia Resident (For Exchange Control <sup>1</sup> )  Yes  No								
<sup>1</sup> For declaration as Malaysia resident, we solemnly declare that we shall consent to abide with and be bound by the provision of the Exchange Control Act 1953 and Bank Negara Foreign Exchange Administrative Policy and any amendments from time to time with regards to any transaction or payments to or from my relevant trading account(s). Refer to T&C for further details.								
4. Is the Applicant a foreign tax resident? Yes No								
If Yes, please specify: Country: Tax Identification No:  If the Applicant is a US Tax Resident and/or US Citizen, please provide us a completed Form W-9								
If no TIN available, please tick following:								
Reason A - The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents								
Reason B – No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN								
issued by such jurisdiction) Reason C – The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN if you have								
selected this reason: \( \text{No tax obligation, therefore country does not issue TIN;} \( \text{Recently became tax resident, therefore no TIN is issued yet;} \) \( \text{Exempted from tax, therefore country does not issue TIN;} \( \text{OR} \) \( \text{Others:} \)								
5. Is the Applicant a "U.S. Person"?(Refer to Utrade Home Page for Terms and Conditions, Part 8 for the definition of US Person)								
Yes No								
If yes, is the U.S. Person a "Specified U.S. Person"? ( <i>Refer to Utrade Home Page for Terms and Conditions, Part 8 for the definition of US Person</i> )  ☐ Yes (Please complete and return signed Form W-9 for this Company and please provide this Company's U.S. Taxpayer Identification Number (TIN).								
□ N <sub>0</sub>								
6. Is the Applicant a Non-U.S. Financial Institution? (Refer to Utrade Home Page for Terms & Conditions, Part 8 for the definition of Non-US FI)  Yes  No (Refer to question no.9)								
<ul> <li>7. If Yes (please complete the following check box) otherwise please proceed to question of no. 8 and 9)</li> <li>A. The Applicant is a Non-participating Foreign Financial Institution</li> </ul>								
B. The Applicant is a "Participating Foreign Financial Institution". Please provide the Company's Global Intermediary Identification Number (GIIN).								
C. The Applicant is a Malaysian-based Financial Institution. Please provide the Company's Global Intermediary Identification Number (GIIN). Do not tick this Box if you also tick Box A above for this Company.								
D. The Applicant is other Partner Jurisdiction Financial Institution. Please provide the Company's Global Intermediary Identification Number (GIIN). Do not tick this Box if you also tick Box A above for this Company.								
E. The Applicant is a Registered Deemed-compliant Foreign Financial Institution. Please provide the Company's Global Intermediary Identification Number (GIIN).								
F. The Applicant is a Certified Deemed-compliant Foreign Financial Institution. Please provide the Company's Global Intermediary Identification Number (GIIN).								
G. The Applicant is an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution. Please provide the Company's Global Intermediary Identification Number (GIIN). (Refer to question no .9(ii))								
H. The Applicant is another Investment Entity. Please provide the Company's Global Intermediary Identification Number (GIIN).								
<ul> <li>I. The Applicant is a Financial Institution – Depository Institution, Custodial Institution or Specified Insurance Company.</li> <li>J. The Applicant is an Exempt Beneficial Owner.</li> </ul>								
Global Intermediary Identification Number ("GIIN")								

**UOBKayHian** 

<ol> <li>Is any of the Controlling Person<sup>2</sup> of the Applicant a U.S. P     <sup>2</sup>Controlling Person is defined as natural person who has at least company.</li> </ol>		No (Refer to question no.9(i))							
If Yes (please complete the following)									
. The Controlling U.S. Person is "Specified U.S. Person	. The Controlling U.S. Person is "Specified U.S. Person."								
B. The Applicant is a Passive Non-Financial Foreign Entincome.	tity (Passive NFFE). Passive NFFE is broadly defined a	s those legal entitles set up to hold assets that produce investment							
C. The Applicant is an Active NFFE. (Refer to Part 15 for the definition of Active NFFE)									
	If both A and B are ticked, please provide the following information for the Controlling Persons of this Passive NFFE who are also Specified U.S. Persons:								
(Please attach a separate list if there is insufficient space)	A d-lungs	II C. Taymayan Idantification Nymbon							
Name of Controlling Person	Address	U.S. Taxpayer Identification Number							
•	Controlling Person means the natural person who exercise control over the company. If the Company and/or the Controlling Person are a tax resident of the United States, please provide our U.S. Taxpayer Identification Number and return a completed signed Form W-9. A U.S. citizen is considered a tax resident of the United States even if they are a tax resident of another unividication.								
9 (i). Please tick one of following:									
A. The Applicant is a Passive Non-Financial Entity produce investment income.	ty (Passive NFE). Passive NFE is broadly define	ed as those legal entitles set up to hold assets that							
B. The Applicant is an Active NFE – a corporation related entity of such a corporation.	on the stock of which is regularly traded on an es	tablished securities market or a corporation which is a							
*	ities market on which the corporation is regular I corporation, please provide the name of regula	•							
Entity of:)									
D. The Applicant is an Active NFE –an Internation	C. The Applicant is an Active NFE – a Government Entity or Central Bank  The Applicant is an Active NFE – a Heterostical Organisation								
E. The Applicant is an Active NFE – other than (1)	· ·								
9(ii). If Applicant has ticked 7(G) or 9(i)(A), then please com									
(a) Indicate the name of any Controlling Person(s) of the	-								
(i)	(ii)								
(iii)	(iv)								
(b) For each Controlling Person, please complete Individu	ual Self-Certification Form.								
2 DOCUMENTS TO BE SUBMITTED (NON RETURNABLE)									
2 DOCUMENTS TO BE SUBMITTED (NOW RETURN)	ADLE)								
Companies Incorporated Under Companies Act 1965/2016		Established Under An Act							
,	Organisation / Bodies	Established Under An Act tution / By Laws of The Society							
Companies Incorporated Under Companies Act 1965/2016	ompanies Act 1965 Organisation / Bodies Copy of Consti	tution / By Laws of The Society							
Companies Incorporated Under Companies Act 1965/2016  Form 9, Form 13, Form 24, Form 44, Form 49 & M&A of Companies Act 1965/2016  Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of the Business License*  Photocopy of Directors/ Act 1965/2016	ompanies Act 1965	tution / By Laws of The Society egistration tion of Governing Body (e.g. Committee / Board Resolution)							
Companies Incorporated Under Companies Act 1965/2016  Form 9, Form 13, Form 24, Form 49 & M&A of Companies Act 1965/2016  Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of the Business License*  Photocopy of Directors/ Act Directors Personal Guarantees  Annual Returns  Directors Personal Guarantees	ompanies Act 1965	tution / By Laws of The Society egistration tition of Governing Body (e.g. Committee / Board Resolution) rincipals / Directors / Authorised Signatories NRIC / Passport							
Companies Incorporated Under Companies Act 1965/2016  Form 9, Form 13, Form 24, Form 44, Form 49 & M&A of Companies Act 1965/2016  Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of General Business License*  Photocopy of Directors Act 1965/2016  Business License*  Photocopy of Directors Personal Guarant General	ompanies Act 1965	tution / By Laws of The Society egistration tition of Governing Body (e.g. Committee / Board Resolution) rincipals / Directors / Authorised Signatories NRIC / Passport of Latest Audited Financial Statement							
Companies Incorporated Under Companies Act 1965/2016  Form 9, Form 13, Form 24, Form 49 & M&A of Companies Act 1965/2016  Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of the Business License*  Photocopy of Directors/ Act Directors Personal Guarantees  Annual Returns  Directors Personal Guarantees	ompanies Act 1965	tution / By Laws of The Society egistration tition of Governing Body (e.g. Committee / Board Resolution) rincipals / Directors / Authorised Signatories NRIC / Passport of Latest Audited Financial Statement							
Companies Incorporated Under Companies Act 1965/2016  Form 9, Form 13, Form 24, Form 44, Form 49 & M&A of Companies Act 1965/2016  Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of General Business License*  Photocopy of Directors Annual Returns  Directors Personal Guarant  Board Resolution  Certified Copy of Latest Act 1965/2016  Company Income Tax  3 Months Bank Statement	ompanies Act 1965  Companies Act 2016  Character of Ruthorised Personnel NRIC  tee / Undertaking  udited Financial Statement  Organisation / Bodies  Copy of Constite of Ruthorised Personnel NRIC  Copy of Resolution of Photocopy of Parameters of Photocopy of	tution / By Laws of The Society egistration tition of Governing Body (e.g. Committee / Board Resolution) rincipals / Directors / Authorised Signatories NRIC / Passport of Latest Audited Financial Statement							
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Companies Incorporated Under Companies Act 1965/2016  Form 9, Form 13, Form 24, Form 44, Form 49 & M&A of Companies Act 1965/2016  Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of the Business License*  Photocopy of Directors/ Authorised Resolution  Certified Copy of Latest Authorised Company Income Tax  Sometimes and Months Bank Statement Form  *Applicable to (i) accredited investors as defined in Schedule 6 and Schedule 7 of (ii) authorised nominee as defined in Bursa Depository Rule	ompanies Act 1965  Companies Act 2016  Character of Ruthorised Personnel NRIC  tee / Undertaking  udited Financial Statement  Organisation / Bodies  Copy of Constite of Ruthorised Personnel NRIC  Copy of Resolution of Photocopy of Parameters of Photocopy of	tution / By Laws of The Society egistration tition of Governing Body (e.g. Committee / Board Resolution) rincipals / Directors / Authorised Signatories NRIC / Passport of Latest Audited Financial Statement							
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6 C	OTHER PARTICULARS OF APPLICANTS	
a.	Does the Applicant have Domestic Ringgit Borrowing as defined under BNM FEA rules?	Yes No
	(For further details, refer https://www.bnm.gov.my/fep for DRM definition under BNMFEA rules)	
b.	Are the Applicant's Directors and/or authorised person related to any staff or Director or Dealer's Representatives of UOB Kay Hian Securities (M) Sdn Bhd ("UOBKH")?	Yes, name and relationship
	<sup>9</sup> related persons means spouse, children, parents, or any accounts where any of the said person(s) has interest and have at least 15% interest	No companies in which the staffs, Directors or Dealers' Representative
c.	Have the Applicant and/or authorised person ever opened an account with UOBKH?	Yes
		No (please state account number and reason for closing of account)
d.	Does the Applicant have existing Securities and/or Derivatives Trading Account with UOBKH?	Yes, Account NoNo
e.	Details of the Applicant's Directors and/or authorised persons with Trading Accounts maintained with UOBKH	i) Name: None ii) Relationship: iii) Account No:
f.	Would the Applicant consent and authorise UOBKH to process any information that has been provided to UOBKH for the purposes of cross selling, marketing and promotions?	Yes No
	By choosing yes, you expressly consent and authorize UOBKH to process any information that you have provided including administering offers and competitions, disclosure of information to UOBKH Group, its agent, and/or sucmay deem fit.	
g. V	Would you like to appoint and empower your Future dealer's representative (inclusive of Associated FBRs) to manage administrative functions in relation to your trading account(s)?	Yes No
	Please be aware of the action of choosing a representative would give rise to risks and legal consequences of whic you have not been informed of or do not fully understand the consequences. You are advised to obtain competent leg have before naming your representative(s).	
7 D	DECLARATIONS AND ACKNOWLEDGEMENT	
("UO: DISC have I by the and it		that we have read each and every DECLARATION, the RISK of therein, and understand its contents and its implications which ar Trading Account(s) application, we hereby agree to be bound ove any of the terms and conditions therein at any time hereafter ified and we agree to be bound by all such variations, additions
	Circumstance of Amelianus	E. C. C. Williams
Nan		Signature of Witness
NR1 Date	IC No: NRIC No:	seal
	TO BE COMPLETED BY FUTURES BROKER'S REPRESENTATIVES	
	KNOW YOUR CLIENT POLICY	
1.	Have you met the Applicant through your personal contact / social networking?	Yes No
	If no, how have you been acquainted with the Applicant?	
2.	Duration of time you have known the Applicant?	Years
3.	Have you had any previous dealings with the Applicant?	Yes No
4.	Does the Applicant have good financial viability and trustworthiness?	Yes No
5.	Is the Applicant actively involved in any political activities or politically linked?	Yes No
Ren	narks :	
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## 9 DECLARATION BY FUTURES BROKER'S REPRESENTATIVE 1. Having assessed the Applicant's financial position, experience in trading and investment objectives, I hereby request that the Applicant be allowed to open and operate the trading account with the Company and allow me to act as the Future Broker's Representatives for the said applicant in accordance with the terms and conditions stated herein. 2. I hereby confirm that: a) I have explained to the Applicant and the Applicant has understood the terms and conditions herein, the contents of the Authorisation and Undertaking for Multicurrency Settlement, Risk Disclosure Statement, and the risks and obligations associated with the trading in derivative including foreign derivative trading and the usage of the Company's electronic services (where applicable); and b) to the best of my knowledge and belief, all information given by the Applicant is true and correct and he has not withheld any material facts. 3. I shall keep you fully indemnified against any losses, damages, debts, interest/late payment charges and all other costs and expenses incurred and suffered by you in relation to the trading account of this Applicant. Name: Code: Date: (Signature of Future Broker's Representatives)

FOR OFFICE USE ONLY								
AML/ Credit Screening								
AML - Experian AML- World Check One			Client Code :					
Credit- Experian			FBR Code :					
Checked By : Date :			Online Trading Facility					
D 1D				Client Code :	Client Code :			
Processed By :	Processed By : Date :			User ID :	User ID :			
Verified By :	Verified By : Date :			FBR Code :		Branch Code	:	
reinied By . Bute .		Processed By :		Date	:			
Risk Profiling	Low	Medium	High	D 1				
Credit Risk Profile				Remarks :				
AML Risk Profile								
Approved Lot Limit (Local								
Approved Lot Limit (Foreign Market) :								
Account Approved By :								
Date	:							