

8. Is any of the Controlling Person² of the Applicant a U.S. Person Yes No (Refer to question no.9(i))

²Controlling Person is defined as natural person who has at least 25% shareholdings in the company.

If Yes (please complete the following)

- The Controlling U.S. Person is "Specified U.S. Person."
- B. The Applicant is a Passive Non-Financial Foreign Entity (Passive NFFE). Passive NFFE is broadly defined as those legal entities set up to hold assets that produce investment income.
- 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)

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 your 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 jurisdiction.

9 (i). Please tick one of following:

- A. The Applicant is a Passive Non-Financial Entity (Passive NFE). Passive NFE is broadly defined as those legal entities set up to hold assets that produce investment income.
- B. The Applicant is an Active NFE – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation.
(Please provide the name of established securities market on which the corporation is regularly traded:)
(If you are a Related Entity of regularly traded corporation, please provide the name of regularly traded corporation that the Entity in (B) is a Related Entity of:)
- C. The Applicant is an Active NFE – a Government Entity or Central Bank
- D. The Applicant is an Active NFE –an International Organisation
- E. The Applicant is an Active NFE – other than (B)-(D)

9(ii). If Applicant has ticked 7(G) or 9(i)(A), then please complete the following:

- (a) Indicate the name of any Controlling Person(s) of the Account Holder:
 - (i) _____ (ii) _____
 - (iii) _____ (iv) _____
- (b) For each Controlling Person, please complete Individual Self-Certification Form.

2 DOCUMENTS TO BE SUBMITTED (NON RETURNABLE)

Companies Incorporated Under Companies Act 1965/2016

- Form 9, Form 13, Form 24, Form 44, Form 49 & M&A of Companies Act 1965
- Section 14, 15, 28, 46, 58, 78, Constitution (if applicable) of Companies Act 2016
- Business License* Photocopy of Directors/ Authorised Personnel NRIC
- Annual Returns Directors Personal Guarantee / Undertaking
- Board Resolution Certified Copy of Latest Audited Financial Statement
- Company Income Tax Form 3 Months Bank Statement

*Applicable to (i) accredited investors as defined in Schedule 6 and Schedule 7 of CMSA; or (ii) authorised nominee as defined in Bursa Depository Rule

Organisation / Bodies Established Under An Act

- Copy of Constitution / By Laws of The Society
- Certificate of Registration
- Copy of Resolution of Governing Body (e.g. Committee / Board Resolution)
- Photocopy of Principals / Directors / Authorised Signatories NRIC / Passport
- Certified Copy of Latest Audited Financial Statement
- 3 Months Bank Statement

3 INVESTMENT EXPERIENCE AND OBJECTIVES

- Future Trading Experience None < 1 year 1-5 years > 5 years
- Investment Objectives Investment Speculation Hedging Arbitraging
- Risk Tolerance Aggressive Moderate Conservative

4 SETTLEMENT BANK ACCOUNT PARTICULARS

Bank Name: Account No⁶:

All payment payable to you shall be electronically crediting to your above bank account.

⁶Kindly take note that the bank account must be in the Applicant name and this bank must be located in Malaysia offering MEPS IBG services as all payment payable to the Applicant shall be electronically crediting to Applicant above Account No.

5 FINANCIAL BACKGROUND

Nature of business _____ Regulated Financial Institution: Country of Jurisdiction the Entity: _____
Shareholders' Funds⁷ RM _____ Reported Profit / (Losses) As Per Latest Audited Financial Statement RM _____

⁷Based on latest Audited Financial Statements

Source of Income/Wealth: Business/ Capital Loan Others: _____

REFER TO BOARD RESOLUTION FOR AUTHORISED SIGNATORIES AND SPECIMEN SIGNATURE OF AUTHORISED SIGNATORIES.

6 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 related⁹ to any staff or Director or Dealer's Representatives of UOB Kay Hian Securities (M) Sdn Bhd ("UOBKH")? Yes, name and relationship
 No
⁹related persons means spouse, children, parents, or any accounts where any of the said person(s) has interest and companies in which the staffs, Directors or Dealers' Representative have at least 15% interest
- 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 No _____
 No
- e. Details of the Applicant's Directors and/or authorised persons with Trading Accounts maintained with UOBKH None
 i) Name:
 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 to UOBKH for the purposes of cross selling, marketing and promotions including administering offers and competitions, disclosure of information to UOBKH Group, its agent, and/or such persons in accordance with Personal Data Protection Act as UOBKH may deem fit.
- g. 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 which you must be prepared to accept. You **SHOULD NOT TICK "YES"** if you have not been informed of or do not fully understand the consequences. You are advised to obtain competent legal advice on your rights and obligations and clarify any doubts you may have before naming your representative(s).*

7 DECLARATIONS AND ACKNOWLEDGEMENT

We hereby confirm that we are fully aware that the full terms and conditions of this Application Form is located at website of UOB Kay Hian Securities (M) Sdn. Bhd. ("UOBKH") (URL:www.utrade.com.my), of which a physical copy has been handed to us and we confirm that we have read each and every DECLARATION, the RISK DISCLOSURE STATEMENTS, the TERMS AND CONDITIONS as well as the UNDERTAKING contained therein, and understand its contents and its implications which have been duly explained to us in detail by the Company. Subject and conditional upon UOBKH approving our Trading Account(s) application, we hereby agree to be bound by them entirely. We are further aware that UOBKH has the sole and absolute discretion to vary, add or remove any of the terms and conditions therein at any time hereafter and it shall be our sole responsibility to keep ourselves aware of all such changes without the need to be notified and we agree to be bound by all such variations, additions or removal of all such terms and conditions accordingly.

Signed By:

Signature of Applicant

Name:
 NRIC No:
 Date:

** If the Applicant is a corporation, please sign as per Board Resolution and affix the company rubber stamp or common seal.*

Signature of Witness

Name:
 NRIC No:
 Date:

8 TO BE COMPLETED BY FUTURES BROKER'S REPRESENTATIVES

D) 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

Remarks : _____

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				Client Code : _____			
<input type="checkbox"/> AML - Experian		<input type="checkbox"/> AML- World Check One		FBR Code : _____		_____	
<input type="checkbox"/> Credit- Experian				Online Trading Facility			
Checked By : _____		Date : _____		Client Code : _____			
Processed By : _____		Date : _____		User ID : _____			
Verified By : _____		Date : _____		FBR Code : _____		Branch Code : _____	
Processed By : _____		Date : _____		Remarks :			
Risk Profiling				_____			
	Low	Medium	High	_____			
Credit Risk Profile	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
AML Risk Profile	<input type="checkbox"/>		<input type="checkbox"/>	_____			
Approved Lot Limit (Local Market) : _____				_____			
Approved Lot Limit (Foreign Market) : _____				_____			
Account Approved By : _____				_____			
Date : _____				_____			