

GENERAL INFORMATION

1. Please read the Account Opening Terms & Conditions before completing this application form.
2. First time investors must complete the Account Opening Form
3. Kindly complete the form in **ENGLISH** (using **CAPITAL LETTERS**) and in **BLACK** or **BLUE INK**. Tick ☒ whenever appropriate.
4. Please note that UOB Kay Hian does not accept applications from applicants with U.S. citizenship / U.S. Permanent Resident Status / Born in U.S. / U.S. Taxpayer Identification Number ("TIN") / U.S. Residential / Mailing Address and/or U.S. Telephone Number.

☐ I am not a doctor or other health care professional.

- ☐ A photocopy of NRIC or Passport
 - ☐ Form W-8 Ben
 - ☐ Margin / Custodian / Investment Management Agreement (*if applicable*)
 - ☐ Form B / EA Form / Payslip / Bank Statement (*Applicable only to Securities and Derivatives Accounts*)
 - ☐ Certified copy(s) of your bank statement / front page of your pass book / details of your bank account obtained from your bank's website / copy of the letter from your bank confirming your bank account (*Applicable only to Securities and Derivatives Accounts*)
 - ☐ Suitability Assessment (*Applicable only to Investment Account*)
 - ☐ Investment Management Agreement X2, Authorisation to Transact and Third-Party Authorisation (*Applicable only to Wealth Fund management*)
 - ☐ Other:

¹ If you do not have an existing CDS Account with UOBKH, please fill in Form FMN010 (Application for opening of CDS Account) and submit together with this form.

☐ SECURITIES ACCOUNT

- | | | | |
|--|---|---|--|
| ☐ SECURITIES ACCOUNT | | | |
| ☐ Normal Trading | ☐ Collateralised Account | ☐ Intraday Short Selling (IDSS) ² | ☐ Discretionary Finance |
| ☐ Day Trade | ☐ Shariah Trading Account | ☐ Extended Contra Account (ECA) | ☐ Margin Account |
| ☐ Cash Upfront | ☐ Leap Market ³ | ☐ Custodian | ☐ External Margin |
| ☐ L&I ETF ^{3 or 4} | ☒ Digital Currency ETF ⁵ | ☐ Others, please specify: | |

²Client needs to sign Securities Borrowing and Lending Agreement

³By choosing this product, I declared that I have fulfilled one of qualifying criteria as prescribed in T&C.

By choosing this product, I declare that I am the Sophisticated Investors and qualified as the Eligible Investors as prescribed in T&C. If I fall under another category as provided in schedule 6 & 7 of CMA 2007, I shall separately inform UOB Kay Hian (M) Sdn. Bhd (UOBKH)

⁵By choosing this product, I hereby declare that I have received and read the Digital Currency Exchange Traded Funds Risk Disclosure Statement as prescribed in T&C.

UTrade Facility ☐ Yes
 Foreign Live Feed⁶ ☐ Singapore (SGX) ☐ Hong Kong (HKEX) ☐ US (Nasdaq⁷, NYSE⁷& AMEX)
 Settlement Currency ☐ Traded Currency *Note: If Client do not select Traded Currency Settlement, the default settlement currency is in MYR*

⁶Please take note that there will be charges for Live Price Feed

⁷Client who request for Live Price Feed for NYSE and Nasdaq must execute the Subscriber Agreement

- ☐ DERIVATIVES ACCOUNT
☐ Shariah Account
☐ Conventional Account

- ## INVESTMENT ACCOUNT

Type of Account:

- ☐ Individual ☐ Joint (Please complete #Relationship table)

Wealth Management: ^{8,9,10,11}	☐ Wrap Account, Wrap Fee: _____
	☐ Non-Wrap Account ☐ Bond Account ^{8,9,13} ☐ Structured Investment
Investment Management: ^{8,10,11,12,13,14}	☐ Discretionary: _____
	☐ Non-Discretionary: _____
	☐ Wholesale fund

Business / Employment / Income Provider Address																											
Postcode																											

Telephone No. (Office)		Fax No	
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Nature of Business	
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Designation	Year(s) of Employment /

Annual Income Range of Applicant/Income Provider (Combination of all Source of Income)

Below ~ RM25,000	RM25,001 ~ RM50,000	RM50,001 ~ RM100,000	RM100,001 ~ RM200,000
RM200,001 ~ RM300,000	RM300,001 ~ RM400,000	RM400,001 ~ RM500,000	Above ~ RM500,000

Estimated Net-Worth	Up to RM 100,000	RM100,001 – RM500,000	RM500,001 – RM3,000,000	Above RM3,000,000
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Source of Funds	Employment	Business	Investment	Inheritance	Savings	Pension/EPF	Others, _____
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Source of Wealth	Employment	Business	Investment	Inheritance	Savings	Pension/EPF	Others, _____
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Education Level	Primary	Secondary	STPM/Diploma/Pre-U	Degree	Post Graduate	Others, _____
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*EPF Acc. No: _____ EPF Simpanan Shariah Yes No *Private Pension Account (PPA)No. _____

**Applicable only to investment account*

Do you have commitments with any financial institutions? Yes No

If yes, please state type Overdraft Property Loan Hire Purchase Share Margin Financing Others, _____

Total commitments (RM)

3. INVESTMENT EXPERIENCE AND OBJECTIVES

Investment Experience (Please tick where applicable)

Securities	☐ None	☐ < 1 year	☐ 1-5 years	☐ > 5 years
Derivatives	☐ None	☐ < 1 year	☐ 1-5 years	☐ > 5 years
Investment Wealth (Units Trusts, Bonds and etc.)	☐ None	☐ < 1 year	☐ 1-5 years	☐ > 5 years

Investment Objectives (Please tick where applicable)

Securities	☐ Investment	☐ Speculation	☐ Mixed		
Derivatives	☐ Investment	☐ Speculation	☐ Hedging	☐ Arbitraging	
Investment Wealth	☐ Income	☐ Income & Growth	☐ Growth	☐ Capital Preservation	☐ Others, _____

4. PARTICULARS OF JOINT INDIVIDUAL APPLICANT (*Applicable only to Investment Account*)

Name of Applicant (as per NRIC / Passport)
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[illegible]

Title		Gender	☐ Male	☐ Female	Race:		Date of Birth (dd/mm/yyyy)								
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Country of Birth ☐ Malaysia ☐ Others (please specify_____)

Nationality ☐ Malaysian ☐ Others (please specify_____)

[illegible]

Correspondence Address as per Registered Address in NRIC (Please tick ☒) ☐

Correspondence Address if different from Registered Address

[illegible]

Is the Above Residence ☐ Owned ☐ Relatives ☐ Rented ☐ Others

Telephone No. (Home)

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 Country of Phone ☐ Malaysia ☐ Others

Mobile No.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%; height: 20px;"></td> </tr> </table>									Country of Phone	☐ Malaysia ☐ Others

E-mail Address	Mother's Maiden Name
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Marital Status ☐ Single ☐ Married ☐ Widowed ☐ Divorced No. Of dependent(s). _____

If married, please complete the spouse's details

[illegible][illegible]

4A FINANCIAL BACKGROUND OF JOINT INDIVIDUAL APPLICANT

EMPLOYMENT PARTICULARS (For Client without any fixed income, please provide your income provider's details or your source of income)

Employment ☐ Employed ☐ Self-employed ☐ Housewife ☐ Retiree ☐ Student ☐ Others

[illegible]

New NRIC						-		-				Old NRIC / Passport								
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Relationship with Income Provider ☐ Family ☐ Members ☐ Others, please specify: _____

Name of Business / Employer

[illegible]

Business / Employment / Income Provider Address _____

[illegible][illegible][illegible]

Designation	Year(s) of Employment /	
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Annual Income Range of Applicant/Income Provider (Combination of all Source of Income)

☐ Below ~ RM25,000	☐ RM25,001 ~ RM50,000	☐ RM50,001 ~ RM100,000	☐ RM100,001 ~ RM200,000
☐ RM200,001 ~ RM300,000	☐ RM300,001 ~ RM400,000	☐ RM400,001 ~ RM500,000	☐ Above ~ RM500,000

Investment Experience ☐ None ☐ < 1 year ☐ 1-5 years ☐ > 5 years

Investment Objective ☐ Income ☐ Income & Growth ☐ Growth ☐ Capital Preservation ☐ Others, _____

Estimated Net-Worth ☐ Up to RM 100,000 ☐ RM100,001 – RM500,000 ☐ RM500,001 – RM3,000,000 ☐ Above RM3,000,000

Source of Funds ☐ Employment ☐ Business ☐ Investment ☐ Inheritance ☐ Savings ☐ Pension/EPF ☐ Others, _____

Source of Wealth ☐ Employment ☐ Business ☐ Investment ☐ Inheritance ☐ Savings ☐ Pension/EPF ☐ Others, _____

Education Level ☐ Primary ☐ Secondary ☐ STPM/Diploma/Pre-U ☐ Degree ☐ Post Graduate ☐ Others, _____

*EPF Acc. No: _____ EPF Simpanan Shariah ☐ Yes ☐ No *Private Pension Account (PPA)No. _____

*Applicable only to investment account

Do you have commitments with any financial institutions? ☐ Yes ☐ No

If yes, please state type ☐ Overdraft ☐ Property Loan ☐ Hire Purchase ☐ Share Margin Financing ☐ Others, _____

Total commitments (RM) _____

4B ADDITIONAL INFORMATION OF JOINT INDIVIDUAL APPLICANT

- a. Do you fall under vulnerable category¹⁷? ☐ Yes ☐ No
¹⁷ A person who has physical disabilities / financially constraint / senior citizen who is non-tech savvy etc
- b. Are you an employee, Dealer's Representative / Futures Broker Representative / Wealth Advisor of UOB Kay Hian (M) Sdn Bhd ("UOBKH")/UOB Kay Hian Wealth Advisors Sdn Bhd (UOBKH WA)? ☐ Yes ☐ No
- c. Are you related¹⁸ to any staff or Director or Dealer's Representative / Futures Broker Representative / Wealth Advisor of UOB Kay Hian (M) Sdn Bhd ("UOBKH")/UOB Kay Hian Wealth Advisors Sdn Bhd (UOBKH WA)? ☐ Yes, name and relationship _____
☐ No
¹⁸related 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
- d. Have you ever opened an account with UOBKH? ☐ Yes _____
 (please state account number and reason for closing of account)
☐ No
- e. Do you have existing Securities and/or Derivatives and/or Investment Account with UOBKH? ☐ Yes, Account No _____
☐ No
- f. Are you a guarantor for any Accounts held in UOBKH? ☐ Yes, Account No _____
☐ No
- g. Details of related persons with Accounts maintained with UOBKH
 iv) Name: ☐ None
 v) Relationship:
 vi) Account No:
- h. Would you consent and authorise UOBKH to process any information that you have provided to UOBKH for the purpose of cross selling, marketing and promotion ☐ Yes ☐ No
 By choosing yes, you expressly consent and authorise 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.
- i. Would you like to appoint and empower your Dealer's Representative (DR) / Futures Broker Representative (FBR) (inclusive of Associated DRs/FBRs and Trading Clerk of DRs/FBRs) / Wealth Advisor (WA) to manage administrative functions in relation to your account(s)? ☐ Yes ☐ No
 Please be aware that choosing a representative may give rise to risks and legal consequences, which you must be prepared to accept. You SHOULD NOT TICK "YES" if you have not been informed of or do not fully understand these consequences. You are advised to seek competent legal advice regarding your rights and obligations, and to clarify any doubts you may have before naming your representative(s)

5. BANK ACCOUNT PARTICULARS

LOCAL BANK ACCOUNT DETAILS (MYR)	FOREIGN BANK ACCOUNT DETAILS (NON-MYR)
Name of Bank:	Name of Bank:
Name of Bank Account Holder:	Name of Bank Account Holder:
Bank Account No ¹⁵ :	Bank Account No ¹⁴ :
	Currency:
Bank SWIFT Code:	Bank SWIFT Code:
Bank Location:	Bank Location:

Are the bank account(s) provided Joint Account(s)? ☐ Yes (ensure both names are indicated) ☐ No <i>(Applicable to Investment – Joint account: If “NO”, please also provide the joint holder bank account)</i>
Name of Bank:
Name of Bank Account Holder:
Bank Account No ¹⁹
Bank SWIFT Code:
Bank Location:

All of sales proceeds shall be automatically held in Client Trust Account, and all withdrawal requests payable to you shall be electronically crediting to your above bank account.

¹⁹Kindly take note that the bank account must be in your name and the bank must be located in Malaysia offering MEPS IBG services. All payment payable to you shall be electronically credited to the above Account No.

6. DECLARATIONS OF RESIDENCE AND DOMESTIC CREDIT FACILITY

	Individual Applicant	Joint Applicant (Applicable only to Investment Account)
Are you a Malaysian Resident (For Exchange Control) <i>For declaration as Malaysia resident I solemnly declare that I 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</i>	☐ Yes ☐ No	☐ Yes ☐ No
Do you have Domestic Ringgit Borrowing as defined under BNM FEP rules? <i>(For further details, refer https://www.bnm.gov.my/fep for DRM definition under BNMFEPR rules)</i>	☐ Yes ☐ No	☐ Yes ☐ No

7. FATCA IDENTITY DECLARATION

	Individual Applicant	Joint Applicant (Applicable only to Investment Account)
1. Born in the United States (U.S)	☐ Yes ☐ No	☐ Yes ☐ No
2. U.S citizen/tax residency (e.g. US passport/Green Card holder/U.S. taxpayer etc.)	☐ Yes ☐ No	☐ Yes ☐ No
3. U.S Taxpayer Identification Number (TIN)	☐ Yes ☐ No	☐ Yes ☐ No
4. U.S registered and/or mailing address	☐ Yes ☐ No	☐ Yes ☐ No
5. U.S contact number (e.g. home, work, mobile, fax numbers)	☐ Yes ☐ No	☐ Yes ☐ No
6. Standing instructions to pay amounts from UOB Kay Hian account to an account maintained in the U.S	☐ Yes ☐ No	☐ Yes ☐ No
7. Power of Attorney of Signatory granted to a person in the U.S.	☐ Yes ☐ No	☐ Yes ☐ No

8. CRS DECLARATION OF TAX RESIDENCY

This section allows you to declare your tax residence under the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard (CRS).

Are you a tax resident of Malaysia and/or any other jurisdiction(s) outside of Malaysia?			
Main Applicant		Joint applicant	
☐ Yes ☐ No		☐ Yes ☐ No	
Country	Taxpayer Identification Number (“TIN”)	Country	Taxpayer Identification Number (“TIN”)
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	
If a TIN is unavailable, please tick (✓) the appropriate reason. ☐ Reason A ☐ Reason B ☐ Reason C (i) ☐ Reason C (ii) ☐ Reason C (iii) ☐ Reason C (iv) Others: please specify: _____		If a TIN is unavailable, please tick (✓) the appropriate reason. ☐ Reason A ☐ Reason B ☐ Reason C (i) ☐ Reason C (ii) ☐ Reason C (iii) ☐ Reason C (iv) Others: please specify: _____	

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:

- i. No tax obligation, therefore country does not issue TIN;
- ii. Retiree – Country does not issue TIN
- iii. Recently, became tax resident/citizen, therefore no TIN is issued yet;
- iv. Exempted from tax, therefore country does not issue TIN;

9. DECLARATIONS AND ACKNOWLEDGEMENT☐ Securities / Derivatives Account

I hereby declare and warrant that the information given in this application submitted to you is complete, true and accurate and that I have not wilfully withheld any material fact / information and I have read and understood all covenants, undertakings, terms and conditions as shown in UOB Kay Hian (M) Sdn. Bhd. ("UOBKH") home page (www.utrade.com.my) and I am aware that they may be updated from time to time at UOBKH discretion without further notice to me to govern my trading account and it shall be my own sole responsibility to keep myself aware of all such updates and changes and I agree to be bound by them entirely. I hereby confirm that I have read each and every DECLARATION, the RISK DISCLOSURE STATEMENTS, the TERMS AND CONDITIONS as well as the COVENANTS and UNDERTAKING contained therein and understand its contents and its implications which have been duly explained to me in detail by UOBKH.

☐ Investment Account

I/We hereby declare and warrant that the information given in this application submitted to you is complete, true and accurate and that I/we have not wilfully withheld any material fact / information and I/we have read and understood all covenants, undertakings, terms and conditions as shown in UOB Kay Hian (M) Sdn. Bhd. ("UOBKH") home page (www.utrade.com.my) and/or UOB Kay Hian Wealth Advisors Sdn Bhd ("UOBKHW") home page (www.uwealth.com.my) and I/we am/are aware that they may be updated from time to time at UOBKH and/or UOBKHW's discretion without further notice to me/us to govern my/our investment account and it shall be my/our own sole responsibility to keep myself/ourselves aware of all such updates and changes and I/we agree to be bound by them entirely. I /We hereby confirm that I/we have read each and every DECLARATION, the RISK DISCLOSURE STATEMENTS, the TERMS AND CONDITIONS as well as the COVENANTS and UNDERTAKING contained therein and understand its contents and its implications which have been duly explained to me/us in detail by UOBKH and/or UOBKHW. I/We am/are aware that UOBKH and/or UOBKHW uses a nominee system. I/We have read and accepted the privacy policy and agree with the processing of my/our personal data. I/We hereby instruct and authorise you to carry out my/our instructions as indicated on this form. I/We agree that you may transfer and disclose any information relating to me/us and my/our account, which is necessary for carrying out these services and/or for compliance, to relevant entities involved in unlisted capital market / insurance, Securities Commission and Bank Negara Malaysia. I/We agree and acknowledge that the value of the Investment(s) may be subjected to various risks including but not limited to market risk and by instructing you in respect of any investments on my/our behalf, I/we shall not hold UOBKH and/or UOBKHW responsible for any losses that I/we may suffer from performance of the investment. I/We declare that I/we am/are not undischarged bankrupt(s), have not committed any act of bankruptcy within the past 12 months and no bankruptcy order has been made against me/us or is/are pending against me/us during this period. I/We declare that I/we am/are not a U.S. Person and in the event of a change in my/our status where I/we become a U.S. Person, I/we shall notify UOBKH and/or UOBKHW of the change. If any information is found false or misleading, UOBKH and/or UOBKHW may reject any of my/our application and/or instructions including but not limited to, any transactional-related activities. Unless otherwise disclosed in writing, I/We hereby declare and warrant that I/We am/are the ultimate beneficial owner of this account and that no person other than myself/ourselves have or will have any interest in, influence or control over this account whatsoever.

Signed By:

Signature of Applicant

Name:

NRIC No:

Date:

Signature of Joint Applicant

(Applicable only to Wealth account)

Name:

NRIC No:

Date:

Signature of Witness

Name:

NRIC No:

Date:

10. TO BE COMPLETED BY DEALER'S REPRESENTATIVES/ LICENSED WEALTH ADVISOR / LICENSED FUND MANAGER

I) KNOW YOUR CLIENT POLICY	Individual Applicant	Joint Applicant (Applicable only to Wealth Account)
1. Have you met the Applicant through your personal contact / social networking? If no, how have you been acquainted with the Applicant?	☐ Yes ☐ No	☐ Yes ☐ No
2. Duration of time you have known the Applicant?	_____ Years	_____ Years
3. Have you had any previous dealings with the Applicant?	☐ Yes ☐ No	☐ Yes ☐ No
4. Does the Applicant have good financial viability and trustworthiness?	☐ Yes ☐ No	☐ Yes ☐ No
5. Have you sighted the original NRIC / Passport with the photocopied documents of the Applicant (Individual only)?	☐ Yes ☐ No	☐ Yes ☐ No
6. Is the Applicant actively involved in any political activities or politically linked?	☐ Yes ☐ No	☐ Yes ☐ No
II) VULNERABLE CLIENT ASSESSMENT CRITERIA		
1. Disabilities ²⁰ – Does the Applicant have any disabilities that could impact their decision making?	☐ Yes ☐ No	☐ Yes ☐ No
2. Life Events – Has the applicant faced significant life events like unemployment or the death or permanent disability of the main breadwinner that caused temporary or long-term financial hardship?	☐ Yes ☐ No	☐ Yes ☐ No
3. Financial Resilience – Does the applicant have a low ability to handle financial shock, such as being heavily in debt, having cash flow issues, or having no savings?	☐ Yes ☐ No	☐ Yes ☐ No
4. Capability – Does the applicant have limited knowledge of financial matters, lack confidence in managing money, or have low skills in areas like literacy, language, or digital skills?	☐ Yes ☐ No	☐ Yes ☐ No
5. Age ²¹ – Is the Applicant a senior citizen who may have limited technological skills?	☐ Yes ☐ No	☐ Yes ☐ No

²⁰ Refers to long-term: (a) hearing impairment; (b) visual impairment; (c) speech impairment; (d) physical impairment; or (e) learning impairment such as dyslexia or low spectrum autism.

²¹ Age 60 and above

III) ADDITIONAL INFORMATION (Applicable only to Securities Account)

Estimated value of cash/shares to be deposited Cash: RM _____ Shares: RM _____ Recommended Limit: _____

Remarks: _____

11 DECLARATION BY DEALER'S REPRESENTATIVE / FUTURES BROKER REPRESENTATIVE/LICENSED WEALTH ADVISOR / LICENSED FUND MANAGER

- 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/investment account with the Company and allow me to act as the Dealer's Representative (DR) / Futures Broker Representative (FBR) (inclusive of Associated DRs/FBRs and Trading Clerk of DRs/FBRs) / Wealth Advisor (WA) for the said applicant in accordance with the terms and conditions stated herein.
- Having assessed the Applicant based on Vulnerable Client Assessment criteria, I hereby understand and agreed that I am expected to respond appropriately, including but not limited to following, if the Applicant falls into any of the categories stated under section 12 (II) 1 to 5 throughout all stages of business relationship:
 - allow the Applicant to have sufficient time to process information that has been provided to him/ her;
 - clarify whether the Applicant is comfortable with the method of communication, and offering to provide details in an alternate format, such as, via post or email for clarity; and asking the Applicant whether he/ she would like to consult someone else first or require someone else to be present with him/ her when advice is given.

I hereby also declared that I am well-trained to have the necessary skills, tools and confidence to deal with vulnerable clients by also putting attention to the use of positive language, empathy, active listening and other specialist communication techniques.
- I hereby confirm that:
 - I have explained to the Applicant and the Applicant has understood the terms and conditions herein, the contents of
 - ☐ Securities Account
 - the Letter of Authorisation, Structured Warrants Risk Disclosure Statement, Foreign Securities Risk Disclosure Statement and the risks and obligations associated with the trading in securities including foreign securities and the usage of the Company's electronic services (where applicable); and
 - ☐ Derivatives Account
 - 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
 - ☐ Investment Account
 - the product(s) features and the risks and obligations associated with the product(s) as offered including but not limited to unit trust, bonds and structure investment products, and the usage of the Company's electronic services (where applicable); and
 - 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.
- 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/investment account of this Applicant.

(Signature of Dealer's Representatives/ Futures Broker Representative/
Licensed Wealth Advisor / Licensed Fund Manager)

Name:

Code (DR/FBR/FA/Covenant):

Date:

FOR OFFICE USE ONLY

Credit and AML Assessment

☐ AML-Experian (COB)	☐ AML-World Check One*	
☐ Credit - Experian	*Note: Not allowed to open if sanctioned under MOHA/UNSC/OFAC	
Checked By :	Date :	
Processed By :	Date :	
Verified By :	Date :	
Risk Profiling	Low	Medium
Credit Risk Profile	☐	☐
AML Risk Profile	☐	☐

^To perform ECDD.

Remarks:

Client/DR/Advisor Code :			
Brokerage Type :			
Product Code :			
Account Type :			
Branch Code :			
(Securities)			
Approved Global Trading Limit			
(Derivatives)			
Approved Lot Limit (Local Market)			
Approved Lot Limit (Foreign Market)			
Account Approved By			
Date			
UTRADE Online Trading Facility			
Client Code :			
UTrade / User ID :			
DR / FBR Code :	Branch Code :		
Processed By :	Date :		