

For Internal Office Use:

Client Code:

Dealer Code:

Branch Code:

**CLIENT'S PARTICULARS UPDATE/ ADDITIONAL REQUEST(S) FORM**

**SECTION A – COMPULSORY FIELDS\* FOR CLIENT'S PARTICULARS**

\* Client Name (as per NRIC/ Authority Card/ Passport/ Business Registration)(Capital Letter):

\* Trading Account(s)  All of trading account(s) that maintained with UOBKH; \* NRIC/ Old IC/ Authority Card/ Passport/ Regist. No.: \_\_\_\_\_  
 No.:(Please tick )  Please specify the trading account number: \_\_\_\_\_

**SECTION B – OPTIONAL FIELDS**

**UPDATING OF CLIENT'S PARTICULARS(Please TICK  that require changes)**

New Name (as per NRIC/ Authority Card/ Passport / Business Registration)  New Passport No.  Registered Address (as per NRIC/ Authority Card/ Business Registration)  
 Correspondence Address: (If different from registered address) \_\_\_\_\_ Postcode: \_\_\_\_\_

Note: Certified True copy of Supporting Documents shall be submitted by Clients for updating of name/ passport no./ address.

Nationality:  Malaysia  Others: \_\_\_\_\_  Tax Resident:  Malaysia  Others: \_\_\_\_\_ ; TIN No: \_\_\_\_\_  
 Marital:  Single  Married, Spouse Name: \_\_\_\_\_  Divorced  Widowed  
 Domestic Ringgit Borrowing:  Yes  No (Refer <http://www.bnm.gov.my/fep> for DRM definition under BNMFEA rules)  
 Updating of Email Address: \_\_\_\_\_  Application for Utrade Facility  
 Updating of Epayment Bank Name: \_\_\_\_\_ Bank Account No: \_\_\_\_\_  Auto payment to client bank<sup>1</sup>

<sup>1</sup>Not applicable to Cash Upfront Account of which subject to Auto To Trust

**UPDATING OF CLIENT'S FINANCIAL INFORMATION(Please TICK  that require changes)**

Employment:  Employed  Self-employed  Retiree<sup>2</sup>  Housewife<sup>3</sup>  Student<sup>3</sup>  Other: \_\_\_\_\_  
<sup>2</sup>Please also provide networth and/ or previous employment details. <sup>3</sup>Please also provide income provider's identification number, employment details, annual income and/ or networth, relationship with income provider and a separate copy of consent letter and PDPA disclosure by income provider.

Name of Income Provider: \_\_\_\_\_ Identification number: \_\_\_\_\_  
 Name of Business/Employer: \_\_\_\_\_  Present position: \_\_\_\_\_

Relationship with Income Provider :  Parents  Siblings  Family Members  Others, please specify: \_\_\_\_\_  
 Contact  Home No.: \_\_\_\_\_  Office No.: \_\_\_\_\_  
 Details:  Handphone: \_\_\_\_\_  Fax. No.: \_\_\_\_\_

Company Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Annual Income:  Below RM25,000  RM25,001-RM50,000  RM 50,001- RM 100,000  RM100,001 -RM200,000  
 RM200,001-RM300,000  RM300,001-RM400,000  RM 400,001-RM500,000  Above RM500,000

Networth: RM \_\_\_\_\_  Shareholders' Funds : RM \_\_\_\_\_  
 Nature of Business: \_\_\_\_\_  Latest audited financial profits/ loss: RM \_\_\_\_\_

Source of Income:  Employment  Business  Inheritance  Investment  Others (Please specify): \_\_\_\_\_

**REQUESTING OF ADDITIONAL ACCOUNT(S)/ PRODUCT(S) (Please TICK  accordingly)**

Normal Trading  Collateralised Acc  Cash Upfront  Custodian  Intraday Short Selling (IDSS)<sup>4</sup>  
 Shariah Trading  Leap Market<sup>5</sup>  L&I ETF<sup>5 or 6</sup>  Discretionary Financing  Extended Contra Acc (ECA)  
 Foreign Trading  Settlement currency in traded currency  Settlement currency in MYR  Others: \_\_\_\_\_

<sup>4</sup>Client needs to sign Securities Borrowing And Lending Agreement.<sup>5</sup>By choosing this product, I/ we declare that I/ we am/ are the Sophisticated Investors and qualified as the Eligible Investors as prescribed in T&C. (Proof of net assets/ income is compulsory.) If I/ we fall under other category as provided in schedule 6 & 7 of CMSA 2007, I/ we shall separately inform the UOB Kay Hian Securities (M) Sdn. Bhd.<sup>6</sup>By choosing this product, I/ we declare that I/ we have fulfilled one of qualifying criteria as prescribed in T&C.

**APPOINTING AND EMPOWERING OF THE DEALER'S REPRESENTATIVE OR ANY OTHER PERSON ("REPRESENTATIVE") TO MANAGE ADMINISTRATIVE FUNCTIONS IN RELATION TO THE TRADING ACCOUNT(S)(Please TICK  accordingly)**

My dealer's representative  
 Others; please provide a copy of NRIC or Passport of the representative.

**SECTION C - DECLARATION AND ACKNOWLEDGEMENT**

I/We declare that all particulars and information given in this Form are true and correct without holding back any material facts or information from UOBKH. UOBKH is entitled to fully rely on such information for all purposes unless otherwise notified in writing from me/us. I/We undertake to furnish UOBKH with such additional particulars as UOBKH may require at any time and also undertake to inform UOBKH of any changes with regard to the particulars stated herein from time to time.

I/We hereby confirm that I/we am/ are fully aware of the updated terms and conditions that govern my Trading Account which can be retrieved from the homepage of UOBKH (URL:www.utrade.com.my), of which I/we confirm that I/we have read each and every DECLARATION, RISK DISCLOSURE STATEMENTS, TERMS AND CONDITIONS as well as the COVENANTS and UNDERTAKING contained therein, and understand its contents and implications which have been duly explained to me/ us in detail by the Company and I/ we agree to be bound by them entirely irrespective of whether my/ our request for updating is approved. I/We am/are further aware that UOBKH has sole and absolute discretion to vary, add or remove any of the terms and conditions therein at any time hereafter and it shall be my/our sole responsibility to keep myself/ourselves aware of all such changes without the need to be notified and I/we agree to be bound by all such variations, additions or removal of all such terms and conditions accordingly.

Please TICK  below accordingly:

I/We confirm and agree that any changes of the above data shall be updated accordingly into UOBKHS internal back office system and Bursa Malaysia Depository (BMD) system provided such similar data fields are available in BMD system for such changes to be updated.

I do not agree to update above data into BMD system; I will submit the relevant CDS form to update separately.

Signed by:

\*\*Signature of Client

Name:

Date :

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

**SECTION D - FOR OFFICE USE ONLY**

|           |              |              |             |             |
|-----------|--------------|--------------|-------------|-------------|
| Signature | Verified By: | Approved By: | Updated By: | Checked By: |
| Date      |              |              |             |             |