

BURSA MALAYSIA DEPOSITORY SDN BHD (165570 W)

	UNT FORM documents. Please read the instructions on the reverse before completing this form.	
CROSS (X) WHERE APPLICABLE APPLICATION FOR OPENING OF ACCOUNT APPLICATION FOR UPDATE	TING OF ACCOUNT PARTICULARS APPLICATION FOR CLOSING OF ACCOUNT	
(Please complete the fields denoted	d with "#" and the relevant particulars to be updated) (Please complete the fields denoted with "#")	
CDS ACCOUNT NUMBER (For new account opening, ADA to complete) #	CROSS (X) WHERE APPLICABLE MALAYSIAN FOREIGNER	
OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO.: #	NEW NRIC NO.: #	
NAME OF APPLICANT/DEPOSITOR (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINESS REGISTRATION	N DOCUMENT): #	
ACCOUNT QUALIFIER (FOR TRUSTEES/CORPORATE BODY) (IF ANY):		
REGISTERED ADDRESS OF APPLICANT/DEPOSITOR (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINES	S PEGISTRATION DOCUMENT)	
REGISTERED ADDRESS OF AFFEICANT/DEFOSITOR (AS FER NRIC/FASSFORT/AOTHORITT CARD/BOSINES	T T T T T T T T T T T T T T T T T T T	
POST CODE: TOWN:		
STATE: COUNTRY:		
CORRESPONDENCE ADDRESS OF APPLICANT/DEPOSITOR (IF DIFFERENT FROM THE REGISTERED ADDRESS A		
POST CODE: TOWN:		
STATE: COUNTRY:		
NATIONALITY/PLACE OF INCORPORATION:	RACE/OWNERSHIP:	
HOUSE/OFFICE TELEPHONE NO.		
BANK NAME: JOINT BANK A	CCOUNT: YES NO CONSOLIDATE (BANK ACCOUNT) Cross (X) if you wish the same bank account information to be used for all your CDS accounts.	
BANK ACCOUNT NO.		
	REVOKE CONSOLIDATION (BANK ACCOUNT) Cross (X) if you wish to revoke a previous request to consolidate (bank account)	
EMAIL ADDRESS		
HANDPHONE NO.		
* I / We hereby make the declarations stated in "Declaration By Applicant/Depositor/Authorised	(For account opening and add/update bank account information) DECLARATION BY DEALER'S REPRESENTATIVE/ADA'S AUTHORISED OFFICER(S)/NOTARY PUBLIC/	
Signatory(ies)/Attorney(s)" under *Part A / Part B overleaf.	OTHERS AS APPROVED BY BURSA MALAYSIA DEPOSITORY SDN BHD ("DEPOSITORY") (To be completed when the method of verification is by any of the above persons)	
	I hereby affirm and attest that the particulars of the applicant/depositor have been verified to be true and the *signature(s)/thumbprint(s) of the *applicant/depositor/authorised signatory(ies)/attorney(s) belong(s) to the	
	*applicant/depositor/authorised signatory(ies)/attorney(s) who *has/have appeared in person before me.	
	NAME :	
	NRIC NO. :	
	LICENSE NO. :	
	(if applicable)	
SIGNATURE(S)/THUMBPRINT(S) OF APPLICANT/DEPOSITOR/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)* DATE	DESIGNATION :	
 Delete whichever is inapplicable ** Affix common seal (where applicable) 	SIGNATURE : DATE :	
FOR OFFIC	E USE ONLY	
To be completed by ADA/ADM/Depository (Sign and affix company rubber-stamp)		
(Sign and anny company rubber-stamp)		
CDS ACCOUNT CLOSED ON:	INVESTOR TYPE ACCOUNT TYPE TAGGING CODE BENEFICIARY	
	CROSS (X) WHERE APPLICABLE (FOR INDIVIDUALS ONLY)	
VERIFIED BY : DATE :	Applicant appeared in person and the original *NRIC/Passport/Authority Card was verified by ADA/ADM.	
	Application received from*Dealer Representative/ADA's Authorised Officer(s)/Notary Public/	
APPROVED BY : DATE :	Others as approved by Depository.	
DATA ENTRY BY : DATE :	Non Face-To-Face Verification	

FMN070 NF/17



BURSA MALAYSIA DEPOSITORY SDN BHD (165570 W)

	UNT FORM documents. Please read the instructions on the reverse before completing this form.	
CROSS (X) WHERE APPLICABLE APPLICATION FOR OPENING OF ACCOUNT APPLICATION FOR UPDATE	TING OF ACCOUNT PARTICULARS APPLICATION FOR CLOSING OF ACCOUNT	
(Please complete the fields denoted	d with "#" and the relevant particulars to be updated) (Please complete the fields denoted with "#")	
CDS ACCOUNT NUMBER (For new account opening, ADA to complete) #	CROSS (X) WHERE APPLICABLE MALAYSIAN FOREIGNER	
OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO.: #	NEW NRIC NO.: #	
NAME OF APPLICANT/DEPOSITOR (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINESS REGISTRATION	N DOCUMENT): #	
ACCOUNT QUALIFIER (FOR TRUSTEES/CORPORATE BODY) (IF ANY):		
REGISTERED ADDRESS OF APPLICANT/DEPOSITOR (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINES	S PEGISTRATION DOCUMENT)	
REGISTERED ADDRESS OF AFFEICANT/DEFOSITOR (AS FER NRIC/FASSFORT/AOTHORITT CARD/BOSINES	T T T T T T T T T T T T T T T T T T T	
POST CODE: TOWN:		
STATE: COUNTRY:		
CORRESPONDENCE ADDRESS OF APPLICANT/DEPOSITOR (IF DIFFERENT FROM THE REGISTERED ADDRESS A		
POST CODE: TOWN:		
STATE: COUNTRY:		
NATIONALITY/PLACE OF INCORPORATION:	RACE/OWNERSHIP:	
HOUSE/OFFICE TELEPHONE NO.		
BANK NAME: JOINT BANK A	CCOUNT: YES NO CONSOLIDATE (BANK ACCOUNT) Cross (X) if you wish the same bank account information to be used for all your CDS accounts.	
BANK ACCOUNT NO.		
	REVOKE CONSOLIDATION (BANK ACCOUNT) Cross (X) if you wish to revoke a previous request to consolidate (bank account)	
EMAIL ADDRESS		
HANDPHONE NO.		
* I / We hereby make the declarations stated in "Declaration By Applicant/Depositor/Authorised	(For account opening and add/update bank account information) DECLARATION BY DEALER'S REPRESENTATIVE/ADA'S AUTHORISED OFFICER(S)/NOTARY PUBLIC/	
Signatory(ies)/Attorney(s)" under *Part A / Part B overleaf.	OTHERS AS APPROVED BY BURSA MALAYSIA DEPOSITORY SDN BHD ("DEPOSITORY") (To be completed when the method of verification is by any of the above persons)	
	I hereby affirm and attest that the particulars of the applicant/depositor have been verified to be true and the *signature(s)/thumbprint(s) of the *applicant/depositor/authorised signatory(ies)/attorney(s) belong(s) to the	
	*applicant/depositor/authorised signatory(ies)/attorney(s) who *has/have appeared in person before me.	
	NAME :	
	NRIC NO. :	
	LICENSE NO. :	
	(if applicable)	
SIGNATURE(S)/THUMBPRINT(S) OF APPLICANT/DEPOSITOR/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)* DATE	DESIGNATION :	
 Delete whichever is inapplicable ** Affix common seal (where applicable) 	SIGNATURE : DATE :	
FOR OFFIC	E USE ONLY	
To be completed by ADA/ADM/Depository (Sign and affix company rubber-stamp)		
(Sign and anny company rubber-stamp)		
CDS ACCOUNT CLOSED ON:	INVESTOR TYPE ACCOUNT TYPE TAGGING CODE BENEFICIARY	
	CROSS (X) WHERE APPLICABLE (FOR INDIVIDUALS ONLY)	
VERIFIED BY : DATE :	Applicant appeared in person and the original *NRIC/Passport/Authority Card was verified by ADA/ADM.	
	Application received from*Dealer Representative/ADA's Authorised Officer(s)/Notary Public/	
APPROVED BY : DATE :	Others as approved by Depository.	
DATA ENTRY BY : DATE :	Non Face-To-Face Verification	

FMN070 NF/17



BURSA MALAYSIA DEPOSITORY SDN BHD (165570 W)

	UNT FORM documents. Please read the instructions on the reverse before completing this form.	
CROSS (X) WHERE APPLICABLE APPLICATION FOR OPENING OF ACCOUNT APPLICATION FOR UPDATE	TING OF ACCOUNT PARTICULARS APPLICATION FOR CLOSING OF ACCOUNT	
(Please complete the fields denoted	d with "#" and the relevant particulars to be updated) (Please complete the fields denoted with "#")	
CDS ACCOUNT NUMBER (For new account opening, ADA to complete) #	CROSS (X) WHERE APPLICABLE MALAYSIAN FOREIGNER	
OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO.: #	NEW NRIC NO.: #	
NAME OF APPLICANT/DEPOSITOR (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINESS REGISTRATION	N DOCUMENT): #	
ACCOUNT QUALIFIER (FOR TRUSTEES/CORPORATE BODY) (IF ANY):		
REGISTERED ADDRESS OF APPLICANT/DEPOSITOR (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINES	S PEGISTRATION DOCUMENT)	
REGISTERED ADDRESS OF AFFEICANT/DEFOSITOR (AS FER NRIC/FASSFORT/AOTHORITT CARD/BOSINES	T T T T T T T T T T T T T T T T T T T	
POST CODE: TOWN:		
STATE: COUNTRY:		
CORRESPONDENCE ADDRESS OF APPLICANT/DEPOSITOR (IF DIFFERENT FROM THE REGISTERED ADDRESS A		
POST CODE: TOWN:		
STATE: COUNTRY:		
NATIONALITY/PLACE OF INCORPORATION:	RACE/OWNERSHIP:	
HOUSE/OFFICE TELEPHONE NO.		
BANK NAME: JOINT BANK A	CCOUNT: YES NO CONSOLIDATE (BANK ACCOUNT) Cross (X) if you wish the same bank account information to be used for all your CDS accounts.	
BANK ACCOUNT NO.		
	REVOKE CONSOLIDATION (BANK ACCOUNT) Cross (X) if you wish to revoke a previous request to consolidate (bank account)	
EMAIL ADDRESS		
HANDPHONE NO.		
* I / We hereby make the declarations stated in "Declaration By Applicant/Depositor/Authorised	(For account opening and add/update bank account information) DECLARATION BY DEALER'S REPRESENTATIVE/ADA'S AUTHORISED OFFICER(S)/NOTARY PUBLIC/	
Signatory(ies)/Attorney(s)" under *Part A / Part B overleaf.	OTHERS AS APPROVED BY BURSA MALAYSIA DEPOSITORY SDN BHD ("DEPOSITORY") (To be completed when the method of verification is by any of the above persons)	
	I hereby affirm and attest that the particulars of the applicant/depositor have been verified to be true and the *signature(s)/thumbprint(s) of the *applicant/depositor/authorised signatory(ies)/attorney(s) belong(s) to the	
	*applicant/depositor/authorised signatory(ies)/attorney(s) who *has/have appeared in person before me.	
	NAME :	
	NRIC NO. :	
	LICENSE NO. :	
	(if applicable)	
SIGNATURE(S)/THUMBPRINT(S) OF APPLICANT/DEPOSITOR/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)* DATE	DESIGNATION :	
 Delete whichever is inapplicable ** Affix common seal (where applicable) 	SIGNATURE : DATE :	
FOR OFFIC	E USE ONLY	
To be completed by ADA/ADM/Depository (Sign and affix company rubber-stamp)		
(Sign and anny company rubber-stamp)		
CDS ACCOUNT CLOSED ON:	INVESTOR TYPE ACCOUNT TYPE TAGGING CODE BENEFICIARY	
	CROSS (X) WHERE APPLICABLE (FOR INDIVIDUALS ONLY)	
VERIFIED BY : DATE :	Applicant appeared in person and the original *NRIC/Passport/Authority Card was verified by ADA/ADM.	
	Application received from*Dealer Representative/ADA's Authorised Officer(s)/Notary Public/	
APPROVED BY : DATE :	Others as approved by Depository.	
DATA ENTRY BY : DATE :	Non Face-To-Face Verification	

FMN070 NF/17

INSTRUCTIONS FOR COMPLETING THE CDS ACCOUNT FORM

General:

- 1. Please type or write using **BLOCK LETTERS**.
- 2. Any amendment made must be legible and countersigned by both the applicant/depositor and the authorised signatory(ies) of the Authorised Depository Agent / Authorised Direct Member.

Applicable To "Application For Opening Of Account" Only

- 1. <u>Supporting Documents:</u> Please refer to www.bursamalaysia.com [Product & Services-Central Depository System (CDS)-Procedures Manual-CDS Guide For Depositors] or your Authorised Depository Agent /Participating Organisation for reference.
- 2. Foreigner: A foreigner is defined as:
 - a) an individual who is not citizen of Malaysia;
 - b) a body, corporate or unincorporate, which is incorporated or constituted, as the case may be, outside Malaysia;
 - c) a trustee administering a trust which is constituted under any foreign law;
 - d) a trust corporation which is incorporated under any foreign law;
 - e) a society, including a co-operative society or any other institution, which is constituted, registered or incorporated under any foreign law;
 - f) a nominee company incorporated in Malaysia which
 - i) is identified with the word "(Asing)" in its name; and
 - ii) performs the services of a nominee, agent or trustee solely for on behalf of legal or beneficial owners of securities who are foreigners; or
 - g) a company, other than a company described under paragraph (f), which is incorporated in Malaysia and where any one of the persons or a combination of the persons referred to in paragraph (a), (b), (c), (d) or (e) is entitled to exercise or control the exercise of more than fifty per centum of the voting rights of the company.

3. Registered Address

- a) For individual applicants/depositors apart from armed forces/police personnel, use the address as stated in national registration identity card (NRIC).
- b) For armed forces/police personnel, use the address of their respective camp/base/station.
- c) For foreign applicants/depositors, use the address as stated in the passport (if any).

4. Signing The Form Before An Acceptable Witness:

Only applicable if the verification of an applicant's identity is to be done through an acceptable witness (instead of the applicant being present in person before an Authorised Depository Agent or through non face-to-face verification):

- a) the form is required to be signed before the acceptable witness who is required to complete the "Declaration By Dealer's Representative/ADA's Authorised Officer(s)/Notary Public/Others As Approved By Bursa Malaysia Depository Sdn Bhd ("Depository")" column; and
- b) the acceptable witness must certify the photocopies of the NRIC/Passport/Armed Forces or Police Personnel Authority Card/supporting documents.

Applicable To "Application For Updating Of Account Particulars" Only

1. <u>Supporting Documents:</u> Please refer to www.bursamalaysia.com [Product & Services-Central Depository System (CDS)-Procedures Manual-CDS Guide For Depositors] or your Authorised Depository Agent / Participating Organisation / Authorised Direct Member for reference.

DECLARATIONS

A) APPLICATION FOR OPENING OF CDS ACCOUNT

DECLARATION BY APPLICANT/DEPOSITOR/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)

- * I/We hereby :-
- i. Declare that *I/We have the full capacity and authority to make the application, and open and operate a CDS account, and that the information given in this application is true and correct as at the date of this form.
- ii. Agree to be bound by the Rules of Bursa Malaysia Depository Sdn Bhd ("Depository") and any directions issued by the Depository, as may be amended from time to time.
- iii. Declare that *I/We are the *beneficial owners/authorised nominee of all securities credited into this account that is to be opened.
- iv. Irrevocably consent to the disclosure by the Depository, the issuer and their respective agents to any person, of such of *my/our personal information, as may be necessary or expedient to facilitate the payment of all cash dividends and other cash distributions that may be due to *me/us in respect of the deposited securities in *my/our CDS account, directly into *my/our bank account as stated in this form or as may be updated from time to time, or for any other purpose in connection with the payment of dividends or other cash distributions via such manner.
- v. Irrevocably consent to receiving all cash dividends and other cash distributions that may be due to *me/us in respect of the deposited securities in *my/our CDS account via direct credit into *my/our bank account as stated in this form or as may be updated from time to time.
- vi. Agree to receive, in relation to my deposited securities and where relevant, electronic notifications instead of hardcopy notification, sent using *my/our contact details as stated in this form or as may be updated from time to time, and further consent to the disclosure of *my/our contact details currently in the Depository's records to:
 - a) Bursa Malaysia Berhad's Group of Companies (the Group) to enable them to communicate capital market related matters, including new developments and initiatives by the Group, to *me/us; and
 - b) facilitate the sending of notices and communications from the issuers and Participating Organisations (POs) e.g eDividend notification, contract notes from POs, and notices/circulars from issuers.
 - * I/We have read and am/are aware of the personal data notice available at Bursa Malaysia Berhad's website at www.bursamalaysia.com.
 - * Delete whichever is inapplicable

B) APPLICATION FOR CLOSING OF CDS ACCOUNT

DECLARATION BY APPLICANT/DEPOSITOR/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)

- * I/We hereby declare that there is nil balance in and no outstanding transactions relating to this account and acknowledge that the Depository will only close the account upon verifying and confirming that there is nil balance and no outstanding transactions relating to this account in the Depository's records.
- * Delete whichever is inapplicable