# ACCOUNT OPENING FORM - INDIVIDUAL



In accordance with the requireme accompanied by the prospectus(			ct 2007, this application form should not be circulated unless f any).
Kindly complete the form in CAPITA		ever appropric	
Maybank Asset Manageme	nt Sdn Bhd (MAM)		For Office Use Only
Maybank Islamic Asset Man	nagement Sdn Bhd (MIAM)		Account Number :
A. INVESTMENT DETAILS			
Product Type	Unit Trust Fund Whol	esale Fund*	*Please fill up Sophisticated Investor Declaration Form Mandate
Investment Type	Cash PlanRSP F	lan	EPF Plan EPF Membership No:
L			EPF Account Type: Shariah Conventional
Account Type	Individual Joint	Individual	
B. PARTICULARS OF FIRST APP			
Salutation		СІК	PUAN Others, please specify:
Full Name			
(as per NRIC / Passport No.)			
NRIC No:	Other ID	No	Date of Birth
Other ID Type:	Old IC Army ID	Police	Birth Certificate
Telephone no.: House			Mobile No.:
Email address:			
Gender	Male	Female	
Nationality	Malaysian	Others:	
	US Citizen/Resident/Permar		
Race	Malay	Chinese	Indian Others:
Bumiputera Status	Bumiputera	Non-Bur	
Marital Status	Single	Married	Divorced Widowed
No of Dependent (if applies)			
Monthly Income	Below RM5,000		to RM8,000 RM8,001 to RM15,000
Turi Otation	RM15,001 to RM20,000	Above RN	
Tax Status	Resident	Non-resid	
Occupation		Retiree	Student
	Employed (please specify Em Self-employed (please spec		* Designation)
	Others (please specify)		
Nature of Business	Agricultural/Forestry		Manufacturing
	Audit/Accounting/Tax/Legc	d	Medical/Health Science
	Building/Construction Relat		Mining/Quarring
	Education		Money Service Business
L	Energy/Utilities		Non-Governmental Organisation (NGO)
			Pawnshop/Dealers in Precious Goods
	Entertainment Outlets		Real Estate/Property
	 Financial Institution/Insurar	ice	Trading/Restaurant/Hotel
	 Government/Regulatory Au		Transport/Telecommunication
	Hotel/Travel Services		Others, please specify
	Import/Export		
Sources of Funds for	Personal Savings		Employment
Investment	Investments		Inheritance, please specify
	Business Income		Others, please specify
Politically Exposed Person	Yes		No

C. PARTICULARS OF JOINT APPLICANT (IF APPLICABLE)																																		
Salutation		MR MS ENCIK PUAN Others, please specify:																																
Full Name																																		
(as per NRIC / Passport No.)																																		
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5. To what extent that you are willing to bear the risk of capital loss	Score
Total loss 100% (6)         Loss more than 50% (4)         Loss more than 10% (2)	
Loss more than 80% (5)         Loss more than 30% (3)         No capital loss (1)	
6. What is your expected return from this investment?	Score
At least 3 - 5% p.a. (1)	
At least 6 - 8% p.a. (2)	
7. Which of the following best fit your current portfolio?	Score
80% cash + 20% fixed income (1) 30% cash + 30% fixed income + 40% equities (3)	
50% cash + 30% fixed income + 20% equities (2)	
8. How long have you been investing, not including your own home or bank deposit?	Score
This is the first time (1) 3 - 5 years (3) More than 10 years (5)	
1 - 2 years (2) 5 - 9 years (4)	
9. Have you invested in any investment product before?	Score
No (1) Yes, last investment was 5 years ago (3)	
Yes, last investment was 10 years ago (2)	
10. Are you 60 years old or above, and less comfortable using technology for investment purposes?	
Yes No Remarks (if any):	
11. Do you have difficulty to read or understand written information about unit trust investments?	
Yes No Remarks (if any):	
12. Do you find it challenging to understand unit trust products or have limited knowledge and experience in dealing with unit trus investments?	t
Yes No Remarks (if any):	
13. Do you struggle with financial difficulties due to high debt, insufficient savings, or cash flow issues, making it difficult to managunation unexpected expenses?	je
Yes No Remarks (if any):	
14. Have there been any life changes that may have affected your financial disability? These may include events such as unemple the death or total permanent disability of the main income earner or any similar circumstances.	byment,
Yes No Remarks (if any):	
15. Do you have any hearing, visual, speech, physical or learning disabilities that may affect your ability to make financial decisio	ns?
Yes No Remarks (if any):	
16. Are you registered with the Department of Social Welfare (Jabatan Kebajikan Masyarakat)?	
Yes No Remarks (if any):	
TOTAL SCO	
PART 2: VULNERABLE CUSTOMER ASSESSMENT (TO BE COMPLETED BY CONSULTANT)	
Please tick ( $$ ) the relevant checkbox below, where appropriate.	
1. Given your assessment and observations, do you consider the applicant to be a Vulnerable Customer?         Yes       No         Remarks (if any):	
2. If applicant is identified as Vulnerable Customer, please tick (√) the relevant vulnerable customer attributes.	
Aged 60 and above who may be less technologically able.	
Financial resilience – individuals with a low ability to withstand financial shocks such as clients who are overly-indebted, h	nave cash flow
problems or have no savings.	
Capability - individuals with low knowledge of financial matters, low confidence in managing money or low capability in	
	other relevant
areas such as literacy, language or digital skills.	other relevant
areas such as literacy, language or digital skills.	
areas such as literacy, language or digital skills.	dship such as
areas such as literacy, language or digital skills.  Life Events – individual who has experienced adverse life events resulting in temporary or long-term financial hard unemployment, or death or total permanent disability of the main breadwinner.	dship such as

H. IN	/ESTOR SUITABILITY ASSESSMENT ACKNOWLEDGEMENT									
Please	tick ( $\checkmark$ ) the relevant checkbox below to indicate your risk class, where appropriate.									
No	Risk classification to determine your investment profile from the assessment		Score	Tick (√)						
1	<b>Income</b> Wants to preserve capital but can accept slight fluctuation for potential capital gain about the same rate inflation	as	9 to 15							
2	<b>Conservative</b> Willing to accept short-term fluctuation for a potential return slightly above inflation in the medium term ( than 2 years)	(less	16 to 22							
3	<b>Balanced</b> Willing to accept potential short-term risks for a higher return in the medium term (2 years or more)		23 to 28							
4	<b>Growth</b> Willing to accept significant short-term risks for greater returns in the long term (up to 5 years)	:	29 to 34							
5	<b>Enhanced Growth</b> Willing to accept significant risks, even capital losses for maximised returns in the long term (5 years or m	ore)	35 to 43							
	The product distributor has explained and I / We have understood the features and risks of the product.									
	I agree with the above risk class and acknowledge receipt of the list of funds offered by MAM / MIAM.									
	I disagree with the above profiling. I / We fully understand the investment risks involved and have decided to continue with our subscription / switching of / to the above fund(s). I / We acknowledge receipt of the list of funds offered by MAM / MIAM. Reason:									
	I do not wish to be profiled. I / We fully understand the investment risks involved and have decided to cont switching of/ to the above fund(s). I/We acknowledge receipt of the list of funds offered by MAM / MIAM.	tinue with our su	bscriptior	ר/						
	First Applicant's Signature Signature of Consult	ant	-							
Nc	me : Name :									
		Y Y Y								
I. FOR	EIGN ACCOUNT TAX COMPLIANCE ACT AND COMMON REPORTING STANDARD INDIVIDUAL SELF-(		1							
IMPOR	TANT NOTE: Please read these instructions before completing the form.									
ce 2) Sh inf Ce	der Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS), MAM/MIAM is re rtain information to the local tax authority on the status of our customers. ould there is a change in circumstances relating to information, such as the account holder's tax status or ormation that makes this form incorrect or incomplete, please let us know by notifying us or providing us w rtification Form.	other mandator	y field	ort						
4) As	is form must be completed by any individual who wishes to open an account. a financial institution, we are not allowed to give tax advice. Kindly consult your tax or legal adviser should ation to FATCA and CRS.	you have quest	ions on oi	' in						
Part 1:	FATCA Self Certification									
The te	i <u>ons applicable</u> m U.S. person or United States person means a person described in section 7701(a)(30) of the Internal Rev m "United States person" means a citizen or resident of the United States	enue Code:								
Please	tick ( $\checkmark$ ) Yes or No for each of the following questions:									
NO	QUESTION		YES	NO						
1	Are you a U.S. Citizen?									
2 3	Do you hold a U.S. Permanent Resident Card (Green Card)									
4	Are you a U.S. Resident? If you have ticked "No" to all three questions above, then please tick as Non U.S. Person.	Non U.S. person		<u> </u>						
	If you have ticked "Yes" to any of the three questions above, please tick as U.S. Person.									
5	Please fill up U.S. IRS form W9 (https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103)	U.S. person								
Part 2:	Jurisdiction of Residence and Taxpayer Identification Number (TIN)									

Complete the following table indication :

(a) the jurisdiction of residence where the account holder is a resident for tax purposes (except for Malaysia) and

(b) the account holder's TIN for each jurisdiction indicated. Indicate All jurisdictions of residence.

If a TIN is unavailable, indicate which of the following reason is applicable:

Reason A – The jurisdiction where the account holder is a resident for tax purpose does not issue TINs to its residents. Reason B – The account holder is unable to obtain a TIN.

## Reason C – TIN is not required.

(Note: Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.)

No	Country of Tax Residence	Taxpayer Identification Number	If no TIN available, indicate
	· · · · · · · · · · · · · · · · · · ·	(TIN)	Reason A, B or C
1			
2			
3			
Please	explain in the following boxes why you are unable to obt	ain a TIN if you selected <b><u>Reason B</u> above</b> .	
1			
2			
3			
Note: If	the account holder is a resident for tax purpose in more	than three countries, please use separate s	sheet.

#### J. DECLARATION

By signing this Form,

- 1) I/We represent and declare that all the information provided above is true, accurate, and complete.;
- 2) This investment is consistent with my/our investment risk requirement and profile.
- 3) The concept of investment risk has been explained to me/us, and I/we understand the risks involved.
- 4) I am/We are not an undischarged bankrupt.
- 5) All monies and other properties to be injected for investment activities by MAM/MIAM are free from any money laundering activities in accordance with the Anti-Money Laundering, Anti-Terrorism Financing And Proceeds of Unlawful Activities Act 2001.
- 6) I/We hereby confirm that I am/we are a "qualified investor"\* (for wholesales funds only).
- 7) I/We acknowledge that this application form has been circulated with the information memorandum(s)/prospectus(es) and supplementary prospectus(es) (if any).
- 8) I/We have read and understood the content of the information memorandum(s)/prospectus(es) and supplementary prospectus(es) (if any) before completing this application form.
- 9) I am/We are aware of the fees and charges that we will incur directly or indirectly when investing in the fund.
- 10) I/We hereby authorize the Manager to execute all transactions that I/we may request via facsimile, email, or by-hand.
- 11) I/We agree and acknowledge that instructions made via facsimile and/or email may not be safe and secure. In this respect, I/we will hold MAM/MIAM harmless from all costs, claims, damages, or losses that I/we may suffer or incur due to MAM/MIAM's reliance on my/our instructions made via facsimile transmissions and/or emails.
- 12) I/We have been informed that any misleading, inaccurate, or incomplete information provided by me/us will affect the outcome of the recommendation made from the suitability assessment. In such a case, MAM/MIAM may not be held liable for such recommendation.
- 13) I/We acknowledge that I am/we are responsible for my/our tax affairs and declare that to the best of my/our knowledge, I/we have not committed or been convicted of any tax crimes.
- 14) I/We hereby undertake to inform MAM/MIAM in writing as soon as possible of any material variation to the information provided.
- 15) I/We declare that I/we have made my/our independent decision to proceed with my/our investments with MAM/MIAM, and that my/our
- decisions are solely that of mine/ours. MAM/MIAM shall not be liable for my/our decisions and has in no way prejudiced my/our decision.
  16) I/We acknowledge and hold MAM/MIAM, its employees, and/or agents harmless for the information provided as it is believed to be accurate and true at the point the information was provided.

#### FATCA AND CRS

- 1) I/We declare that the information provided in this form regarding FATCA and CRS is true, accurate and complete.
- 2) I/We understand that the term "U.S. person"\*\* means any citizen or resident of the United States.
- 3) I/We declare that I am not/we are not a U.S. person\* and in the event of a change in my/our status that I/we become a U.S. Person, I/we shall notify MAM/MIAM of the change.
- 4) I/We certify that I am/we are authorized to sign for the Account Holder in respect of all the account(s) to which this form relates.
- 5) I/We hereby consent to MAM/MIAM or its related entities disclosing the financial accounts information to regulatory authorities in accordance with the requirements of FATCA and CRS as may be stipulated by applicable laws, regulations, agreements, or regulatory guidelines or directives.
- 6) I/We agree that MAM/MIAM may classify me/us as a reportable account and/or suspend, recall, or terminate my/our account(s) and/or facilities granted to me/us, in the event I/we fail to provide accurate and complete information and/or documentation as MAM/MIAM may require.
- 7) I/We agree that MAM/MIAM may withhold from my/our account(s) such amounts in accordance with the provisions of the Foreign Account Tax Compliance Act or as may be stipulated by applicable laws, regulations, agreements, or regulatory guidelines or directives.
- 8) I/We undertake to notify MAM/MIAM in writing within 30 calendar days of any change in circumstances which causes the information contained herein to become incorrect.

#### Definition:

\* The definition of "Qualified investors" as defined by Securities Commission Malaysia (SC) means a) Individuals: Total net personal assets or joints assets with his or her spouse, exceeds RM3 millions or its equivalent in foreign currencies excluding the value of the individual's primary residence or b) Corporations: Total Net Assets exceeding RM10 million or its equivalent in foreign currencies based on the last audited account. \*\*The term "U.S. person" means: a) A U.S. citizen (including dual citizen); b) A U.S. resident alien for tax purposes; c) A domestic partnership; d) A domestic corporation; e) Any estate other than a foreign estate; f) Any trust if: (i) A court within the United States is able to exercise primary supervision over the administration of the trust, and (ii) One or more United States persons have the authority to control all substantial decisions of the trust; and g) Any other person that is not a foreign person.

#### COLLECTION AND DISCLOSURE OF INFORMATION AND DATA

MAM/MIAM refers to Maybank Asset Management Sdn Bhd / Maybank Islamic Asset Management Sdn Bhd being entities licensed to carry on the business of fund management granted by the Securities Commission Malaysia in accordance with the Capital Markets and Services Act 2007 to me/us. The Maybank Group refers to entities within the Group, its overseas branches as well as parent company (where applicable) and its local and overseas subsidiaries.

I/We acknowledge and agree that: -

- (a) Collection of Data: In addition to the information and data (which may include personal data) provided herein, MAM/MIAM may obtain and collect the required information and data (which may include personal data) from time to time, from any relevant sources, including but not limited to publicly available sources, credit information from the Inland Revenue Authorities, Employees Provident Fund ("EPF"), other financial institutions, Central Credit Reference Information System (CCRIS), SME Credit Bureau, any other credit reference agencies, Maybank Group's own database and systems, and any other person, individual and / or entity which the required information and data (which may include personal data) in relation to the purpose of the products and/or services offered to me/us, and to carry out any commercial transactions entered into with MAM/MIAM and/or the Maybank Group, as deemed appropriate.
- (b) Processing of Data: For the purpose in relation to the products and/or services offered to me/us, to carry out any commercial transactions entered into with MAM/MIAM and/or the Maybank Group, for any business and/or operational requirements of MAM/MIAM and/or Maybank Group and to exercise MAM/MIAM's and/or Maybank Group's rights and obligations, MAM/MIAM may need to process, transfer, store, maintain my/our information and data (which may include personal data) relating to my/our affairs, accounts and business;
- (c) Disclosure to Maybank Group: MAM/MIAM may, in addition to the specific terms and conditions governing the financings, products, and/or services, disclose my/our information and data (which may include personal data) collected and processed as above, to the Maybank Group including overseas, for any business and/or operational requirements of MAM/MIAM and/or Maybank Group, and to exercise MAM/MIAM's and/or Maybank Group's rights and obligations;
- (d) Disclosure to External Parties: MAM/MIAM may, in addition to the specific terms and conditions governing the financings, products, and/or services, disclose my/our information and data (which may include personal data) collected and processed as above, to the following parties within and outside Malaysia (where necessary), including but not limited to ("External Parties"):
  - governmental and regulatory bodies such as Bank Negara Malaysia and Securities Commission or to the Credit Bureau established by Bank Negara Malaysia or any other banking or any other regulatory authorities to whom MAM/MIAM/Maybank Group is required or permitted to make such disclosure;
  - 2) Maybank Group's auditors, legal advisors and other professional advisors, any credit agencies, debt collection agencies, asset tracing specialists, association of banks or similar industry bodies;
  - any actual or potential participant or transferee of MAM/MIAM's and/or Maybank Group's rights or obligations related to the financings, products and/or services made available to me/us;
  - 4) any representative, agent, service provider, outsourcing service provider, strategic business partner, financial institution, financial services provider or any other entity that MAM/MIAM or Maybank Group may use or engage with and/or have a contractual relationship with, both in and outside of Malaysia;
  - 5) any security party, any guarantor and/or surety, co-debtor, and where applicable any joint account holder, and/or party making a claim under any third party payment instrument or person who has undertaken liability for the financings, products and/or services made available to me/us;
  - 6) any owner/manager of products and services, where MAM/MIAM or Maybank Group act as agents for such owners/managers;
  - 7) any other financial institution, where applicable, in relation to the products and/or services made available by MAM/MIAM;
  - any person, agency, governmental authority or body pursuant to any laws or regulations;
  - 9) any legal dispute forum (e.g. court, arbitration proceeding, mediation bureau, tribunal) pursuant to any law or regulation, in accordance to any court order or other legal process or in connection with any action, suit or proceeding; and/or
  - 10) EPF, if applicable, information pertaining to my/our account for any applications for withdrawal submitted by me/us and/or if such information and/or verification is sought by EPF, and to entities within Maybank Group to facilitate any of my/our application for financings, products and/or services that I/we have subscribed to (i.e. Will/ Wasiat and/or insurance products) and for verification purposes required by the said entities within Maybank Group.

These External Parties, where permitted, may transfer, store, maintain and/or process my/our information and data within or outside of Malaysia.

#### Disclosure to Bank Negara Malaysia

I/We agree that MAM/MIAM may be or are required, whether pursuant to law or otherwise, to provide information to Bank Negara Malaysia regarding the financings, products and/or services granted to me/us, or my/our accounts, and/or any commercial transactions entered into with MAM/MIAM and/or Maybank Group. I/We expressly consent to MAM/MIAM disclosing such information to Bank Negara Malaysia (including for the purpose of collation of information from banks regarding their customers), to enable participating banks and other financial institutions to assess the credit worthiness of existing or potential customers. MAM/MIAM will not be liable whether directly or indirectly to me/us or any other persons for such disclosure.

### PERSONAL DATA PROTECTION ACT (PDPA) 2010

#### Maybank Group's Privacy Statement

- 1) The Maybank Group Privacy Statement which is posted on the MAM/MIAM website at maybank-am.com.my/privacy\_policy ("Privacy Statement") outlines how MAM/MIAM processes, collects, uses, maintains, stores, discloses, secures and retains (including for the purposes of statistical analysis and market research) personal data as defined in the Privacy Statement. I/We agree that the Privacy Statement has been referred to prior to me/us providing MAM/MIAM with any personal data and information and acknowledge that I/we have read, understood and agree to the terms of the Privacy Statement.
- 2) I/We hereby give my/our explicit consent for MAM/MIAM to collect and process my/our sensitive personal data which is required to assess and administer the products or services that I/we have applied for, pursuant to Personal Data Protection Act 2010.

#### **Disclosure of Personal Data of Individuals**

1) In the event MAM/MIAM requests from time to time that I /we provide the personal data and information of the following persons (where applicable), who might be individuals:

a) my/ our guarantor(s);

b) my/our any other security party;

c) our directors, shareholders, employees, agents, representatives and/or those of any guarantor, security party; or

d) any other individual,

(each an "Individual") in the course of my/our transactions with MAM/MIAM;

2) I/we warrant that I/we have full legal authority and have complied with the Personal Data Protection Act 2010 by obtaining the relevant consent from the Individual to furnish his or her personal data to MAM/MIAM (save and except for personal data collected from public domain or official documents) for MAM/MIAM to process such personal data under the terms and conditions governing this application form and the Privacy Statement. I/We further undertake to inform and furnish the Privacy Statement to the Individual before providing MAM/MIAM with the Individual's personal data and shall, if requested, immediately provide evidence of my/our compliance with the above to MAM/MIAM.

#### Declaration for Promotion and Direct Marketing (where applicable)

With regards to promotions and direct marketing of product and services: -

Yes, I/we expressly agree to MAM/MIAM/Maybank Group and/or Other Entities disclosing, sharing and processing my/our information and data (which may include my/our personal data) and contacting me/us for promotions and direct marketing of products and services.

No, I/we do not agree to MAM/MIAM/Maybank Group and/or Other Entities disclosing, sharing and processing my/our information and data (which may include my/our personal data) and contacting me/us for promotions and direct marketing of products and services.

#### **Revocation for Consent**

I/We understand that I/we may at any time revoke my/our consent provided above insofar as the revocation would not impact the provisions of the services/products applied for or MAM/MIAM's compliance to legal and regulatory requirements.

#### Acknowledgment

I/We acknowledge and declare that I/we have read, understood and agree to the above terms and conditions and am/are expressly consenting to and authorising MAM/MIAM and Maybank Group to act in accordance with the above terms and conditions.

First Applicant's Signature												
Name :												
Date :												

Joint Applicant's Signature										
Name :										
Date :	D D / M M / Y Y Y Y									

#### **DOCUMENT CHECKLIST**

The following documents must be submitted together with this form. The Manager may request for additional documents (where applicable).

	To Tick (√)										
Required Documents	Individual / Joint	Company / Institution	Partnership	Sole Proprietor	Club / Society / Charity	Others					
Certified true copy of NRIC or Passport		N/A	N/A	N/A	N/A	N/A					
Bank statement as indicated in Section F (shows client's name and account number)		N/A	N/A	N/A	N/A	N/A					
Board Resolution (including specimen signature(s) and list of authorised signatory(ies) or authorisation for any person(s) to represent / open / operate on behalf of the organisation)		N/A	N/A		N/A	N/A					
Certificate of Incorporation (Form 9)/ Certificate of Registration Certificate / Relevant Constituent documents or other similar documents		N/A	N/A	∩/А	N/A	N/A					
Duly certified true copy of latest Form Section 58 Companies Act 2016, Section 68 Companies Act 2016, 24, 44, 49 and 32A or other similar documents		N/A	N/A			N/A					
Duly certified true copy of a Memorandum and Articles of Association or Constitution		N/A			N/A	N/A					
Latest Audited Annual Report		N/A	N/A	N/A	N/A						

NOTE:

- 1) For company / institution, all documents must be certified true copy by the company secretary.
- 2) Appointed authorised signatory(ies) must submit photocopy of NRIC and to be certified true copy / original sighted by authorised licensed holder only.

FOR INTERNAL USE ONLY									
Signaturo		PF No. / UTC/MR Code							
Signature		PF NO. / UTC/MR CODE	·						
Name	:	UTC / MR Contact No	:						
Date		UTC / MR Email Address	:						
FATCA AND CRS ASSESSMENT (FOR INTERNAL USE ONLY)									

## Reasonable Test:

This section is to be completed by Consultant/Relationship Manager of MAM/MIAM. Questions below to be considered in conjunction with all documents & forms collected from customers (including this form).

Applicant Name:\_\_\_\_\_

NRIC / Other ID No: \_\_\_\_\_

		To tic	k (√)	Action required if (I)/co//
No	U.S Indica Status			Action required if "Yes"
		Yes	No	(FATCA Documentation Checklist)
1	Have the account holder(s) provided a <b>U.S. place of birth</b> ?			a. If account holder is confirmed U.S person:
				- Form W-9 <u>or</u>
				b. If account holder is non U.S person:
				- Certificate of Loss of Nationality, and
				appropriate documentation(*) NI or
				- Form W-8BEN N3(***)
2	Have the account holder(s) provided any indication that the account			a. If account holder is confirmed U.S person:
	holder(s) are <b>U.S. citizen or resident?</b>			- Form W-9
3	Have the account holder(s) provided a <b>U.S. address</b> (including P.O. Box)?			b. If account holder is non U.S person:
				- Appropriate documentation(*) or
4	Have the account holder(s) provided <u>only</u> <b>a U.S. telephone number</b> ?			- Form W-8BEN(**)
5	Have the account holder(s) provided a <b>U.S. telephone number <u>and</u> a non</b>			
	U.S. telephone number?			

6	Have the account holder(s) provided any standing instructions to		]		
	transfer funds to an account maintained in the U.S.?				
7	Have the account holder(s) granted Power of Attorney to a Person with				
	a U.S. address?				
8	Have the account holder(s) provided only a U.S. "hold mail" or "in care				
	of" address, that is the sole address for this account?				
	Customer(s)' FATCA Classification:				To Tick (√)
No	n. U.S. Person				
U.S	S. Person				
Re	calcitrant customer with U.S. Indicia				
Re	calcitrant customer without U.S. Indicia				
Re	calcitrant customer that is U.S. Person				
Re	calcitrant customer that is dormant account				
		Totic	k (./)	Action require	d if "Ves"

No	U.S Indica Status	To tick (√)		Action required if "Yes"
		Yes	No	(CRS Documentation Checklist)
1	Have the account holder(s) provided any indication that the account holder(s)			
	are from other Jurisdictions N3?			
2	Have the account holder(s) provided any other Jurisdiction address (including			
	P.O. Box)?			
3	Have the account holder(s) provided one or more telephone numbers in other			Documentary evidence to establish
	Jurisdiction?			the Account Holder's Jurisdiction
4	Have the account holder(s) provided any standing instructions to transfer funds			
	to an account maintained in other Jurisdictions?			status.
5	Have the account holder(s) granted Power of Attorney to a Person with address			
	Jurisdictions, that is the sole address for this account?			
6	Have the account holder(s) provided "hold mail" or "in care of" address of other			
	Jurisdictions, that is the sole address for this account?			

Notes:

\*Customer can also provide alternative documentation, a form of documentary evidencing citizenship in a country other than the United States, and a reasonable written explanation of the account holder's renunciation of U.S. citizenship at birth in order to establish the account holder's status as a foreign

person (i.e. other than U.S.) such as: • Certificate of residence

• Individual government identification with respect to an individual (e.g. Identification Card)

• Any valid identification issued by an authorised government body (e.g. a government or agency thereof, or a municipality) that is typically used for \*\*In the absence of any appropriate documentation evidencing account holder is non U.S. person, Relationship Manager should obtain form W-8BEN.

\*\*\* Jurisdictions: Country (ies) other than Malaysia and U.S.

## DECLARATION AND ACKNOWLEDGEMENT

I declare that: the r	equired account opening checks have been perforr	med for the customer(s) lis	sted above; and that the information provided is				
true, correct and updated.							
Signature	:	PF No. / UTC/MR Code	:				
Name	:	Date	:				