

UPDATE OF ACCOUNT PARTICULARS (CORPORATE/OTHER ENTITES)

Please provide latest information for changes only

1. ACCOUNT INFORMATION						
Name of Account Holder						
Name of Account Holder:						
Company/Entity Registration No. :	Irading Account No(s). :					
2. UPDATE OF ADDRESS Registered Address						
Negistered Address						
Principal Place of Business (if different from Registered Address)	* Please provide a copy of the supporting document (less than 3 months old)					
Finicipal Flace of Business (if uniferent from Registered Address)	rease provide a copy of the supporting document (less than 3 months old)					
Mailing Address* (If different from Registered Address/ Principal Place of	Business) * Please provide a copy of the supporting document (less than 3 months old)					
Reason for using the mailing address:						
Relationship to the owner of the mailing address:						
3. UPDATE OF CONTACT NUMBER(S) AND EMAIL ADDRESS						
Office Telephone No.	Fax No.					
Email Address						
4. UPDATE OF NAME, NATIONALITY OF SHAREHOLDERS (Owning	g ≥ 51% of the Company) & PR STATUS					
(Supporting documents submitted must be certified true copy by Holder or a Notary Public)	KGI's Authorised Staff or an Executive Director of the Account					
Updated Name						
Nationality of Shareholders Owning ≥ 51% of the Account Holder						
☐ Singapore ☐ Malaysian ☐ Others, please specify						
Permanent Resident of Singapore? ☐ Yes ☐ No UI	timate Holding Company (if applicable)					
5. UPDATE OF TAX RESIDENT INFORMATION	, (
(1) Entity Type (Please provide the account holder's status by ticking one of the fo	ollowing boxes)					
(a) Financial Institution - Investment Entity						
 An Investment Entity located in a Non-Participating Jurisdiction and m Please indicate the name of all Controlling Person(s) of the account holds 	9 ,					
Trace market are market of an estimating traces (e) of the design market	7.					
Each Controlling Person is required to complete "Controlling Person Tax Residency Self-Certification Form", which is available upon						
request.						
☐ Other Investment Entity						
(b) Financial Institution - Depository Institution, Custodial Institution or Specified Insurance Company						
If you have ticked (a) or (b) above, please provide, if held, the account ho FATCA purposes. GIIN:	older's Global Intermediary Identification Number ("GIIN") obtained for					
(c) Active NFE - a corporation the stock of which is regularly traded on an Es of such a corporation	tablished Securities Market or a corporation which is a Related Entity					
Please indicate the name of the Established Securities Market: Please indicate the name of the regularly traded corporation if you are a Related Entity of such a corporation:						
☐ (d) Active NFE - a government entity or central bank						
\square (e) Active NFE - an international organisation						

			an (c)-(e) (for example a sta	art-up NFE or a non-profit NFE	≣)		
		Passive NFE		() ()			
	ŀ	Please indicate the na	me of all Controlling Perso	n(s) of the account holder:			\neg
						_	
			erson is required to comple	te "Controlling Person Tax Re	sidency Self-Certification	on Form", which is available upon	
		request.					
(2)	Cour	ntry/Jurisdiction of Res	sidence for Tax Purposes a	and related Taxpayer Identifica	tion Number or equival	lent number ("TIN")	
	Plea	se complete the follow	ving table indicating (i) where	e the account holder is tax resid	dent and (ii) the account	holder's TIN for each country/jurisdiction	n indicated.
	Plea	se indicate <u>all</u> countrie	es/jurisdictions (including Sir	ngapore and US, if applicable).	If the account holder is r	not tax resident in any country/jurisdictio	n (e.g., because
	it is f loca		ease indicate that on line 1 i	n the table below and provide it	s place of effective man	nagement or jurisdiction in which its princ	cipal office is
		e account holder is a tanber assigned by IRAS		e TIN is the Unique Entity Numl	per ("UEN"), the Income	e Tax Reference Number ("ITR"), or the	Tax Reference
				reason A, B or C where indicat			
				ount holder is resident does not			ba balani tabla 9
		eason B - The accou ou have selected this r		e to obtain a TIN or equivalent i	number (Please explain	why you are unable to obtain a TIN in t	ne below table if
	•		,	ason if the domestic law of the	relevant country/jurisdict	tion does not require the collection of the	e TIN issued by
		uch jurisdiction).			• •	·	•
		ountry/Jurisdiction of tax residence	TIN	If no TIN available, enter Reason A, B or C		you are unable to obtain a TIN ou selected Reason B	
	1						
	2						
	_						
	3						
	4						
	5						
• F	JS In or m	ternal Revenue Serv nore information, plea	ice Forms: https://www.irs. se visit the OECD or IRAS	gov/forms-instruction s website:	W-9 Form, which is av	vailable upon request or can be downl	oaded from the
<u> </u>	ttp://	www.oecd.org/tax/au	utomatic-exchange/commo	n-reporting-standard/ national-Tax/Common-Repor	ting-StandardCRS-/		
• F	Pleas	e note that it is an off		gapore laws to knowingly pro		ng information regarding tax residency	status and that
6.	UF	PDATE BOARD OF	DIRECTORS/PRINCIPA	AL OFFICERS			
·-	<u> </u>			LE OT FIGERO			
PΙε	ase	tick accordingly:					
		ched a copy of lates Singapore Incorpora		ssued by the Accounting an	d Corporate Regulato	ory Authority ("ACRA") and supporti	ng documents*
			•	or filed with the authority a ncy which is < 3 months old		ents* (for Foreign entities) ments** (for Tax Haven Incorporat	ed Companies)
Su	рроі	ting documents re	efer to the identification	documents of Directors,	Company Secretary	, Shareholders/Beneficial owners	s.
* [ocu	ment to be certified	true copy by KGI's Autho	orised Staff or an Executive	Director of the Comp	pany or a Notary Public.	
			.,,,	orised Staff or a Notary Pub	•		
7.	OF	TION FOR RECEIV	VING E-CONTRACT / E-	STATEMENT (APPLICABI	E FOR SECURITIES	S TRADING)	
			e our e-contract note/e-si		e) sent via to our em	ail address maintained with KGI. W	e further

8.	UPDATE OF AUTH	ORISED PERSON(S) 1	O ACT FOR THE	COMPANY					
CER	TIFIED TRUE EXT	RACT OF RESOLUTION	ONS						
We, Rese	the undersigned, holutions dated	ereby certify that in re have b	spect of the Acc een duly passed	ount Holder specified by:-	I herein (the "Account Holder"), th	e following			
	(For corporation) th	ne Board of Directors of	the corporation in	accordance with its m	emorandum and articles of association	on/charter/constitution.			
	(For partnership, limited partnership ("LP") or limited liability partnership ("LLP")) the partners of the partnership/LP/LLP in accordance with its partnership/LP/LLP agreement.								
	(For other entity with		(please specify) th	ne(insert name of its co	(insert name of its managemen onstitution).	t body) in accordance			
RES	OLVED: (please cro	oss off those sections th	at require no upda	ate)					
	each of the following ount(s) on behalf of the		eby empowered to	o give instruction on an	y and all matters relating to trading ir	connection with the			
	Name	NRIC/Passport No.	Designation	Tel. No.	Residential Address	Signature			
That docu	any * one / two of		whose specime	n signatures appear h	nereunder be and are hereby auth any and all matters relating to the se				
	Name	NRIC/Passport No.	Designation	Tel. No.	Residential Address	Signature			
	IVGIIIC	NATION despote NO.	Designation	I GI. INU.	Nesidential Address	oignature			

version 9 – Dec 2017

*Please provide identification copy (ies) of newly added authorised persons for verification purposes.

Please provide identification copy (ies) of newly added authorised persons for verification purposes. Bellow is applicable for online trading only) hat each of the following persons be and is hereby empowered to receive the passwords, personal identification numbers or access numbers or oddes and to perform online trading on behalf of the Account Holder. Name NRIC/Passport No. Designation Tel. No. Email Address Please provide identification copy (res) of newly added authorized genoms for verification purposes. For a confirm that we shall ensure that there is no unauthorized use of the passwords, personal identification numbers or access numbers or codes are will be fully responsible for all trades executed. That a certified copy of this resolution be communicated to KGI and shall remain in full force until an amendment thereof is received by KGI in writing ERTIFIED TRUE COPY affix company stamp, if any)	Name		Dagian	nation		Tel. No.		Email Address	
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9. DECLARATION AND AGREEMENT

- (i) We have the authority to make this update and we hereby authorize and consent to the update of the above information to all of our trading accounts ("Account") maintained with KGI.
- (ii) We declare that the information provided herein (including all supporting documentation furnished in connection herewith) is true, complete and correct and we have not withheld any material fact.
- (iii) We hereby represent and warrant that we have provided all documentation or other information to KGI for compliance with all requirements under Foreign Account Tax Compliance Act ("FATCA"), Common Reporting Standard ("CRS"), local legislation in connection with FATCA and CRS, and any other provision arising out of an agreement between governments in relation to FATCA and CRS.
- (iv) We undertake to notify KGI in writing within thirty (30) days of any change of the information herein (including our tax status) and provide KGI with such information, documents or other evidence which may be required in connection with such change.
- (v) We agree that the Account shall be governed by the KGI terms & conditions for trading ("T&C") as may be varied/amended or supplemented from time to time. We acknowledge that the prevailing KGI T&C is available on www.kgieworld.sg and that a printed copy of the KGI T&C is available upon request.

Authorised Signatory	Authorised Signatory	
Name:	Name:	
Designation: Date:	Designation: Date:	
Company's stamp:		
	FOR OFFICE USE ONLY Signature Witnessed / Verified by	