For New Clients / New Account Mandate



Thank you for choosing RHB Bank Berhad, ("RHB Bank" or "the Bank") for your banking needs.

As a first step to serving you and your company, please complete and furnish the relevant documents indicated in the following document checklist. If you require assistance, please contact your Relationship Manager, call 1800 323 0100 (Monday – Friday, 8.45 a.m. – 6.00 p.m.) or visit any of our branches.

#### **DOCUMENT CHECKLIST**

Documents required	Private limited/ Public Company/ Exempt Private Company	Limited liability partnership	Partnership/ Limited partnership	Sole proprietorship	Association/ Club/Society/ MCST/ Religious Organisation
Account Opening Form	1	1	1	<i>✓</i>	1
Board Resolution (as per the Bank's standard copy)/Resolution of Board of Directors/Committee	1	1			<i>✓</i>
Certified true copy of Memorandum & Articles of Association (M&AA)/ Constitution/By-Laws	<i>✓</i>				<i>✓</i>
Certified true copy of NRIC/Passport of all Authorised Persons, Authorised Signatories, Ultimate Beneficial Owners, Directors, Guarantors, Office Bearers, Partners and Persons Mandated to transact the bank account.	1	5	<i>√</i>	1	<i>✓</i>
Certificate of Registration/ACRA Business Profile	<ul> <li>Image: A start of the start of</li></ul>	1	1	1	1
Certificate of Official Listing of Office Bearers/Minutes of Meeting reflecting List of Office Bearers					1
Partnership Agreement		1	1		
In the event that original documents cannot be made available to RHB Bank for verification, true copies are to be certified by: NOTE: The same is applicable for signatories to be present at Bank Branch for account opening.	A notary public, a lawyer or certified public accountant or practicing chartered secretaries Note: Chartered Secretary in the employment of the customer is not allowed to certify identification documents of customers, beneficial owner or authorized signatory.				

Additional documents required if company is incorporated outside of Singapore					
Certificate of Incorporation/ Registration <sup>^</sup>	1	1	$\checkmark$	1	
Certificate of Incumbency# (for companies incorporated in tax-haven countries)	1	1	1	1	

<sup>^</sup> To be issued by Registrar of Companies.

# Issued not more than 6 months from the date of account opening.

#### NOTE:

- 1) All documents submitted must be in English. Please ensure that all non-English documents are translated into English by an official translator and certified true copy.
- 2) The Bank may request for additional documents, depending on the set-up of your Company.
- 3) Signature and identification (Singapore NRIC/Malaysia NRIC/Passport) are to be verified by a RHB Bank Officer/ notary public/lawyer/certified public accountant/practicing chartered secretaries.
- 4) Proof of residential address (issued in the last 6 months) required if passport is used as a means of identification.

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All fields to be completed in BLOCK LETTERS. Please indicate "N.A." where inapplicable.

1. Accounts that I/we need				
Account type				
Current Account	SGD USD Others (please	specify)		
BizPower Quad Current Account	SGD USD			
BizPower Quad+ Current Account	SGD USD			
Fixed Deposit Account <sup>1</sup>	Multi-Currency Account			
I/We authorise RHB Bank to debit this	account type	and	currency	
for Reflex Internet Banking-related charges.				

Is the account an "in trust", "trust", "clients' or customers" or "nominee account":

🗌 Yes 🗌 No

If Yes, the operation of the account will be subject to the Terms And Conditions For Accounts In Trust Or Trustee Accounts which Terms and Conditions is available at https://www.rhbgroup.com.sg

By proceeding with the application, the applicant represents that the applicant has read, understood and agreed to Terms And Conditions For Accounts In Trust Or Trustee Accounts.

#### Purpose of Account(s) - you may choose more than one

	Business operations	Investment	Loan Servicing	Others	(please specify)
_	Baaniooo oporatione				( //

Trade facilities

#### Anticipated monthly transactions

Volume of transactions:	Credit	Debit	Total Value	Credit	Debit
Less than 5			Up to S\$100,000		
5 to 10			S\$100,001 to S\$500,000		
11 to 20			\$\$500,001 to \$\$1,000,000		
Above 20			\$\$1,000,001 to \$\$2,000,000		
			Above S\$2,000,000		

#### Kindly provide the below information:

Top five customers:	Top five suppliers:
1)	1)
2)	2)
3)	3)
4)	4)
5)	5)

#### **Primary Source of Funds**

Business	s/Sales Proceeds	Savings/Investments	Rental Proceeds
🗌 Trust Fu	Inds	Dividends/Profit	Return on Investments
Insurance	e Maturity/Surrender	Legal Settlement	Inheritance
Gift/Doi	nation	$\Box$ Credit Facility approved by Financial Institution	
Sale of I	nves/Shares/Prop/Land	Transfer from Parent/Holding/Subs	
Trf from	Own Account with Other FI	🗌 Own Bank Transfer (Within RHB)	
Others	(please specify)		

<sup>1</sup> Not applicable for Reflex application.

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#### Initial deposit amount (please choose one)

- Up to S\$10,000
- S\$10,001 to S\$50,000
- □ S\$50,001 to S\$100,000
- □ S\$100,001 to S\$200,000
- Above S\$200,000

#### Source of Funds (Country)

S/No.	Type of Source of Funds	Country of Source of Funds	Percentage
1			
2			
3			
4			
5			

#### 2. Business Particulars

Registered name			
Alias / Business Known As			
Former name			
Registered address			
		Registered Addre	ess Country
Mailing address (if different from regis	tered address)		
Business Operations / Activities Ad	dress		
		Business Addres	is Country
Registration no.		Date of establishi	ment D D M M Y Y Y Y
Account name (if different from registe	ered name)		
Nature of business (please provide a de	scription on the goods & services provi	ided)	
Total Assets S\$	Paid up Capital	S\$	
Business Annual Turnover S\$			
Business Type: Private limited	Limited liability partnersh	σία	Partnership/Limited partnership
<ul> <li>Public company</li> </ul>	Association/Club/Societ		
Sole proprietorship	Exempt Private Compan	у	Others (please specify)

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#### Source of Wealth

Business/Sales Proceeds
Savings / Investments
Rental Proceeds
Return on Investments
Insurance Maturity/Surrender
Legal Settlement
Inheritance
Credit Facility approved by Financial Institution
Sale of Inves/Shares/Prop/Land
Others (please specify)

#### Incorporation/Registration of Business

#### **Country of Incorporation:**

- i. 🗌 Singapore
- ii. Others (please specify)

Reason for having an account in SG

#### **Country of Operation:**

- i. Singapore
- ii. Others (please specify)

Reason for having an account in SG

#### **Country of Headquarters**

(If different from country of incorporation)

#### **Country of Exposure**

Top 5 countries of counterparties (sellers/buyers)

1)			
2)			
3)			
4)			
5)			

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#### 3. Authorised signatories/Reflex Internet Banking users

Reflex service package details: User(s) will be issued with Hardware / Digital Token (Secure Plus) to access Reflex. Free for the first 2 hardware tokens at point of application only. Subsequent hardware token at S\$20 (GST inclusive) each.

Dr Mr Miss Mrs Mdm Others				
Former Name (if any)				
Alias (if any)				
ID Number	Date of birth D D M M Y Y Y Y			
ID Type (NRIC/Passport/FIN)				
Country of birth	Nationality			
Other Nationality(ies), if applicable ID Number	ID Type (NRIC/Passport) Date of Expiry			
Name of employer	Nature of employment/business			
Designation	Email			
Residential Address				
Mailing Address (if different from residential address)				
For transaction related enquiries and to receive SMS not Country code Area code Contact				
Mobile no + -				
Office phone no +				
Fax phone no + -				
Set as Authorised Signatory				
	Assign signing group (Optional)			
	Others			
<ul> <li>Contact Person</li> <li>Set as Reflex Internet banking User for new Business Internet Banking customer only.</li> </ul>				
Preferred User ID (6-18 alphanumeric characters)				
Select Customised role type# (Select one role)         Maker       Authoriser       Reviewer (Optional)         Administrator 1 (Maker)       Administrator 2 (Authoriser)       Inquirer (Optional)         Single Control access       Administrator 1 (Maker) with Financial Transaction         Administrator 2 (Authoriser) with Financial Transaction				

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Select Reflex Token Type (select one option)				
Hardware Token	📃 Digital Token (Secur	e Plus)		
Account Access	-			
All Account(s)	Specific Account(s)			
Indicate signing group (Optional)				
○ A ○ B ○ C ○ Others				

• Authoriser: Approve Transactions

# Please read the notes below before filling up the appropriate section.

- Maker: Create Transactions
- Single Access Control: Same user will initiate and approve all transactions. Option defaults to only 1 user allowed for system access.
- Inquirer: View account details only
- Administrator with Financial Transaction: Perform user security administrations and create or approve transactions
- Reviewer: Review transactions submitted by Maker Administrator: Only perform user security administrations

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Dr Mr Miss Mrs Mdm Others				
Name (as per ID Document)				
Former Name (if any)				
Alias (if any)				
ID Number	Date of	birth D D M M Y	ΥΥΥ	
ID Type (NRIC/Passport/FIN)				
Country of birth	Nationa	Nationality		
Other Nationality(ies), if applicable ID Number		ID Type (NRIC/Passport)	Date of Expiry	
Name of employer	Nature	of employment/business		
Designation	Email			
Residential Address				
Mailing Address (if different from residential address)				
	otifications. ct number			
Mobile no +			_	
Office phone no + -			_	
Fax phone no + -				
Set as Authorised Signatory				
Assign signing group (Optional)				
O A O B O C Others				
Contact Person				
<ul> <li>Set as Reflex Internet banking User for new Business Internet Banking customer only.</li> <li>Preferred User ID (6-18 alphanumeric characters)</li> </ul>				
Select Customised role type# (Select one role)         Maker       Authoriser         Administrator 1 (Maker)       Administrator 2 (Authoriser)         Single Control access       Administrator 1 (Maker) with Financial Transaction         Administrator 2 (Authoriser) with Financial Transaction				

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Select Reflex Token Type (select one option)			
Hardware Token	📃 Digital Token (Secur	e Plus)	
Account Access	-		
All Account(s)	Specific Account(s)		
Indicate signing group (Optional)			
○ A ○ B ○ C ○ Others			

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Dr Mr Miss Mrs Mdm Others				
Name (as per ID Document)				
Former Name (if any)				
Alias (if any)				
ID Number	Date of	birth D D M M Y	ΥΥΥ	
ID Type (NRIC/Passport/FIN)				
Country of birth	Nation	Nationality		
Other Nationality(ies), if applicable ID Number		ID Type (NRIC/Passport)	Date of Expiry	
Name of employer	Nature	of employment/business		
Designation	Email			
Residential Address				
Mailing Address (if different from residential address)				
For transaction related enquiries and to receive SMS n Country code Area code Conta	otifications at number			
Mobile no + -				
Office phone no +				
Fax phone no   +				
Set as Authorised Signatory				
Assign signing group (Optional)				
Contact Person				
Set as Reflex Internet banking User for new Business Internet Banking customer only.				
Preferred User ID (6-18 alphanumeric characters)				
Select Customised role type# (Select one role)         Maker       Authoriser       Reviewer (Optional)         Administrator 1 (Maker)       Administrator 2 (Authoriser)       Inquirer (Optional)         Single Control access       Administrator 1 (Maker) with Financial Transaction         Administrator 2 (Authoriser) with Financial Transaction				

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Reflex service package details: User(s) will be issued with Hardware / Digital Token (Secure Plus) to access Reflex. Free for the first 2 hardware tokens at point of application only. Subsequent hardware token at S\$20 (GST inclusive) each.

Select Reflex Token Type (select one option)			
Hardware Token	Digital Token (Secure Plus)		
Account Access			
All Account(s)	Specific Account(s)		
Indicate signing group (Optional)			
○ A ○ B ○ C ○ Others			

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Dr Mr Miss Mrs Mdm Others					
Name (as per ID Document)					
Former Name (if any)					
Alias (if any)					
ID Number	Date of birth D D M M Y Y Y Y				
ID Type (NRIC/Passport/FIN)					
Country of birth	Nationality				
Other Nationality(ies), if applicable ID Number	ID Type (NRIC/Passport) Date of Expiry				
Name of omployer	Nature of ampley mont (buringer				
Name of employer	Nature of employment/business				
Designation	Email				
Residential Address					
Mailing Address (if different from residential address)					
For transaction related enquiries and to receive SMS not Country code Area code Contact					
Country code     Area code     Contact number       Mobile no     +     -					
Office phone no +					
Fax phone no + -					
Cot as Authorized Signatory					
Set as Authonsed Signatory	<ul> <li>Set as Authorised Signatory</li> <li>Assign signing group (Optional)</li> </ul>				
O Others					
<ul> <li>Contact Person</li> <li>Set as Reflex Internet banking User for new Business Internet Banking customer only.</li> </ul>					
Preferred User ID (6-18 alphanumeric characters)					
Select Customised role type# (Select one role)         Maker       Authoriser       Reviewer (Optional)         Administrator 1 (Maker)       Administrator 2 (Authoriser)       Inquirer (Optional)         Single Control access       Administrator 1 (Maker) with Financial Transaction         Administrator 2 (Authoriser) with Financial Transaction					

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Select Reflex Token Type (select one option)			
Hardware Token	📃 Digital Token (Secur	e Plus)	
Account Access	-		
All Account(s)	Specific Account(s)		
Indicate signing group (Optional)			
○ A ○ B ○ C ○ Others			

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- Inquirer: View account details only
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#### 4. Signing Conditions

4.1. Authorisation Limits and Signing Requirement/Approval Mandate for Operation of Account (Signing)

- Singly
- Any two jointly
- Grouping and signing limits as follows:

#### 4.2. Authorisation Limits and Signing Requirement/Approval Mandate for Reflex Internet Banking

Business Internet Banking Transaction Approval Limits
Defaulted to SGD

Any amount(No charges)

Signing Requirement/Approval Mandate (Select one)

○ Any one ○ Any two ○ Others

(By indicating Transaction Approval Limits below, a set up charge of minimum S\$250 will apply)

#### **Authorisation Mandate**

Combination of Authoriser grouping(s) eg. 2A + 1B (2 Group A authorisers + 1 Group B authoriser)

#### Sequential Authorisation

eg. Priority 1: 2A + Priority 2: 1B or Priority 1: 1C (2 Group A must approve **before** 1 Group B to complet e; or 1 Group C can approve to complete)

Transaction limit	(SGD equivalent)	Authorisation mandate	Sequential authorisation	
From	То	Autorisation manuate	(Tick if applicable)	
\$0				

Foreign currency transactions will be calculated based on the SGD-equivalent Transaction Approval Limit indicated above, according to the exchange rate as determined by the bank. The Transaction Approval Limit will apply to all Authorisers.

#### 5. For Authorised Contact Personnel:

Effective from the date hereof, I/we, the approving person(s) of these Account(s) (including Islamic Account(s)) maintained with RHB Bank hereby irrevocably and unconditionally authorise the Bank (without the Bank being obliged) to receive and communicate account information ("Communication") given from/with or purporting to be from/with the Authorised Contact Personnel appointed, with or without separate independent verification by the Bank's officers as to the genuineness of such Communication, so long as the Bank's officers receiving or acting on such Communication believed the Communication to be genuine at the time it was given. I/We shall be bound by any acts or omissions taken by the Bank in reliance on such Communication, regardless whether such Communication has been given by me/us or with my/our authority or consent and regardless whether such Communication is forged, fraudulent, ambiguous or misunderstood, provided that the Bank's officers receiving or acting on such Communication believed the Communication to be genuine at the time it was given.

This authority shall take immediate effect and continue to be in force until I/we have expressly revoked it by notice in writing delivered to you. I/We undertake to keep RHB Bank informed of any change to the particulars of the Authorised Contact Personnel provided in this form. The Bank will not be held responsible in any manner for my/our failure to notify the Bank of such change.

The personnel whose information appear(s) in the Authorised Contact Personnel to Receive and Communicate Account Information section in this form shall at any time be authorised to perform and effect the following services for and on my/our behalf:

- Account balance enquiry •
- Account number enquiry
- Account statement request
- Transaction status inquiry
- Account fee waiver enquiry/request
- Confirm instructions received by the Bank via facsimile

I/We confirm that the abovementioned Authorised Contact Personnel appointed has/have sufficient authority to receive and communicate account information stipulated in this form for and on my/our behalf and all such Communication shall be binding and conclusive on me/us.

#### **Section B: Declarations**

I/We confirm that I/we have read and understood RHB Bank's Terms and Conditions Governing Accounts (available at all Bank branches), Terms and Conditions Governing the use of RHB Reflex (if applicable) and agree to abide and be bound by these terms and conditions. I/We agree that the Bank may vary, alter and amend any terms and conditions in its sole discretion.

I/We understand that my/our submission of this application and acceptance of this application by RHB Bank shall in no way be construed as approval of my application and that RHB Bank reserves the right not to approve this application without giving any reasons whatsoever.

I/We confirm that I/we am/are not in the process of being liquidated, struck-off, wound-up or terminated, and that there has been no Statutory Demand served on me/us, and that there has been no legal proceedings commenced against me/us at the time of this application.

I/We agree that I/we shall be jointly and severally responsible and liable to RHB Bank for all monies owing/payable and liabilities incurred to RHB Bank by us or any of us whether in the name of or on behalf of the partnership firm or otherwise. Upon any partner ceasing to be a member of the partnership firm by death, bankruptcy, retirement or otherwise, RHB Bank shall treat the surviving or continuing partner or partners for the time being as having full power to carry on the business of the partnership firm and to deal with its assets, as if there had been no change in the partnership firm (applicable to partnership only).

I/We represent and warrant that my/our funds do not originate from, nor will they be routed through, an account maintained at a Foreign Shell Bank1, or a bank organised or chartered under the laws of a Non-Cooperatives Jurisdiction<sup>2</sup>.

I/We declare that information given in this application is true and correct and that I/we have not wilfully withheld any facts. I/We warrant that all copies of documents submitted to RHB Bank are true copies and belong to RHB Bank absolutely. I/We authorise RHB Bank to obtain and verify all information about me/us as it may deem fit at its absolute discretion. I/We agree to promptly provide any information or representations deemed necessary by RHB Bank for verification, in its sole discretion, to comply with anti-money laundering regulations countering the Financing of Terrorism and related responsibilities from time to time. I/ We acknowledge that in the event of delay or failure to produce any information or representations required by RHB Bank for verification purposes, RHB Bank may take such actions as in its sole discretion deem necessary, including, without limitation, to refuse to accept this application and/or the funds.

I/We undertake to keep RHB Bank informed of any changes in my/our particulars given in this application. I/We confirm that RHB Bank may at any time and without liability to me/us, disclose any information relating to me/ us or any of my/our accounts which I/we may have with you, to any third party as you may deem fit at your absolute discretion if compelled by law, there is a duty to the public to disclose, interest of the bank require disclosure and disclosure is made with customer's expressed or implied consent and as stated in the terms and conditions.

I/We hereby certify and confirm that the person(s) whose signature(s) appear in the Authorised Signatories section above and acting according to the signing conditions/mandate indicated therein are authorised to draw, sign, accept or make for or on my/our behalf all cheques, bills of exchange, orders to pay and any other instruments (even if, where permitted by RHB Bank the relevant account is or will become overdrawn) in respect of or in connection with the Account, even though the payment is for the benefit of any director, employee, authorised person/signatory or individual order of any signing person without RHB Bank having to enquire into the circumstances or being liable in any way in respect of such payment and RHB Bank be and is authorised to honour any such cheques, bills of exchange, orders to pay and any other instruments.

The person(s) whose information appear(s) in the Authorised Signatory(ies) section in this application form and/or in other letter(s) of instruction is/are authorised to perform and effect the above services opted by me/us at any time and from time to time for and on my/our behalf in relation to the abovementioned accounts. I/We confirm that the abovementioned Authorised Signatory(ies) has/ have sufficient authority to perform and effect all transactions of such services for and on my/our behalf and all such transactions shall be binding and conclusive on me/us.

I/We confirm that RHB Bank is authorised to verify and/or make any checks and/or obtain any information and/ or confirmation, with or from any credit reference agencies and/or any other agencies and/or from any financial institution, on me/us and/or any other person, individual and/or entity as the Bank may deem fit, for any purposes which the Bank deems fit.

RHB Bank is hereby irrevocably and unconditionally authorised to disclose any information or particulars given by me/us herein to any person(s) in or out of Singapore and for such purpose(s) as RHB Bank deems fit, proper or necessary at any time.

<sup>1</sup> Refers to a foreign bank without physical presence in any country.

<sup>2</sup> Refers to any foreign country that has been designated as non-cooperative with international anti-money laundering principles or procedures by an inter-governmental group or organisation, such as the Financial Action Task Force on Money Laundering ("FATF").

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I/We undertake to do the following to enable the Bank to comply with the notices and guidelines issued by the Monetary Authority of Singapore and other regulatory requirements or acts that are and that may be imposed from time to time:

Declare that I/we

i. will exercise due care to ensure our account is not used in any way to engage, directly or indirectly, in a transaction that involves proceeds of any unlawful activity;

ii. provide the Bank with all relevant information and documents, as and when requested.

To allow the Bank to:

- i. earmark the said amount or whole account and disallow any withdrawal;
- ii. debit the account for amount that is deemed to arise from the unlawful activity;
- iii. reject opening of any new account(s);
- iv. close the account(s);
- v. terminate the banking relationship;

if the Bank finds that the operations of the account(s) fails the due diligence (or enhanced due diligence as the case may be) exercise conducted by the Bank.

The Bank also has the right to intervene, intercept and investigate any payment, messages and other information or communications sent to or by me/us and may delay, block or refuse to make any transactions pursuant to this account. I/We hereby duly acknowledged and understood that I/we may be liable and/or any legal obligations can or may be imposed on me/us pursuant to the Corruption, Drug Trafficking and Other Serious Crimes (Confiscation of Benefits) Act 1992, regulations imposed by the Monetary Authority of Singapore and/or any other applicable laws and regulations.

#### 6. Deposit Insurance Scheme

Singapore dollar deposits of non-bank depositors are insured by the Singapore Deposit Insurance Corporation, for up to S\$100,000 in aggregate per depositor per scheme member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

#### 7. Authorisation and indemnity in respect of telephone, facsimile, and telecommunications instructions

- I/We, the undersigned hereby request and authorise RHB Bank Berhad ("the Bank") to act on any instructions and/or communications, either orally or in writing by way of telephone, telex, telegram, cable, facsimile or by any other means

   ("the instructions") given or signed or purportedly to be given or signed or sent by me/us or our authorised representative.
- II. In consideration of the Bank agreeing to act as aforesaid, I/we hereby agree and undertake:
  - a) to implement and maintain security procedures and measures in order to ensure the protection of any of the instructions given against the risk of unauthorised access or alterations;
  - b) that the Bank shall have no responsibilities whatsoever for acting or relying on any of the instructions;
  - c) that the Bank shall have no responsibility or liability for the non-performance of its obligations hereunder by reason on any cause beyond its control, including, without limitations, any breakdown or failure of transmission or communication or computer facilities;
  - d) to fully indemnify and at all times keep the Bank fully indemnified from and against all claims and demands, actions and proceedings, loss, expenses and costs (including legal costs on a full indemnity basis) inclusive of any goods and services tax and all other liabilities of whatsoever nature or description resulting directly or indirectly from it's reliance on any of the instructions;
  - e) that the provisions of this letter shall remain in full force and effect until the Bank receive notice of revocation in writing from me/us, save that such revocation will not release me/us from any liability and indemnity under this letter the provisions of this paragraph 7 in respect of any omission or act done or performed or carried out in accordance with the provisions of this paragraph 7 prior to the date or receipt of such notice by the Bank.
- III. Notwithstanding the above, where the Bank receive the instructions by:
  - a) telephone or orally, the Bank shall not be obliged to act except upon receipt of confirmation of such instructions in writing, if the Bank at its discretion shall so require. The Bank shall be under no duty or obligations to enquire or verify the identity of the caller giving such oral instructions. The Bank shall be entitled to assume that such oral instructions are duly authorised by me/us.
  - b) facsimile, the Bank shall not be obliged to act upon the contents of the facsimile which appears to bear my/our authorised signatory(ies) except upon confirmation of such instructions by telephone from me/us (if the Bank at its discretion shall so require). The Bank shall be under no duty or obligation to enquire into the genuineness or authenticity of the instructions given or of the authorised signatory(ies) signed or purportedly signed by me/us.

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- IV. The Bank shall be entitled in its absolute discretion to refuse to comply with any of the instructions which in its opinion are unclear, incomplete, illegible or ambiguous or which may cause the Bank to contravene any law or regulation for the time being in force and the Bank shall not incur any liability to me/us as a result of such refusal to act.
- V. We understood and agreed that the risks of misunderstandings and errors and the risks of instructions given by unauthorised parties are our own and that neither you nor any of your Officers shall be responsible for any loss, liability or expense that may result from such misunderstandings, errors and unauthorised instructions. We assume all responsibility for any and all consequences and or damages that may result from you following such instructions.
- VI. The rights and obligations of the parties herein shall be governed and interpreted in accordance with the laws of Singapore.

#### 8. Tax Self- Declaration

As part of RHB's commitment to being fully Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) compliant, we are required to document our customers' tax information before completing the process of account opening. If you are a tax resident outside the country where your account is held, we are obliged to share your tax residency and other information relating to your accounts with the local tax authority where applicable and they may exchange this information with tax authorities of another jurisdiction or jurisdictions pursuant to intergovernmental agreements to exchange financial account information.

#### What is required of me?

All entity customers are required to provide RHB with their FATCA and CRS status by completing this Entity Self-Certification Form. This form must be submitted with the attached Controlling Person Self-Certification Form(s), depending on your FATCA or CRS status. As an entity account holder, please fill in:

- Entity Self-Certification form; and attach it with
- Controlling Person Self-Certification form(s) applicable to certain types of entities as in Section 4

For entities with more than one controlling person(s), please submit one Controlling Person Self-Certification Form for each person.

Every entity (including a sole-proprietorship that is owned by a business entity) is to complete this form. If the entity as sole proprietorship owned by a natural person, then he or she is not to complete this form but to complete the Individual Self-Certification Form instead.

You may refer to the Definitions and Interpretation for a summary of terms used in this form.

#### What does this mean for me?

By returning this form to us, you are deemed to have provided your consent for RHB to process and store the data contained within the documentation on RHB internal systems.

If you have any questions about this form or these instructions please visit: www.rhbgroup.com, visit a branch or contact your relationship manager.

This form will remain valid unless there is a change in circumstances relating to information, such as the account holder's tax status or other mandatory field information that makes this form incorrect or incomplete. In that case you must notify us and provide an updated self-certification.

As a financial institution, we are not allowed to give tax advice. Your tax adviser may be able to assist you in answering specific questions on this form.

#### Section 1: Declaration of Tax Residency - Other than US

Please provide the tax residency information in the following table:

If the Account Holder is not a tax resident in any country/jurisdiction (e.g., because it is fiscally transparent), please indicate that in any of the box below and provide its place of effective management or jurisdiction in which its principal office is located. If the Account Holder is tax resident in more than three countries/jurisdictions, please use a separate sheet.

For entity that is a sole-proprietorship owned by a natural person, please complete the Individual Self-Certification Form instead.

Country of Tax Residency	Taxpayer ID No. (TIN)	If no TIN, tick one of the reasons
		A The Country/Jurisdiction where the Account Holder is a resident does not issue TINs to its residents
		<b>B</b> 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)
		C Others – No TIN is required (Note: Please select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).
		A The Country/Jurisdiction where the Account Holder is a resident does not issue TINs to its residents
		<b>B</b> 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)
		C Others – No TIN is required (Note: Please select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).
		A The Country/Jurisdiction where the Account Holder is a resident does not issue TINs to its residents
		<b>B</b> 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)
		C Others – No TIN is required (Note: Please select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).

#### Section 2: For Entity incorporated, organised or operating in the US

Please complete where applicable:

1	Tick one of the following for Federal tax classification and enter additional information where required:		
	<ul> <li>C Corporation</li> <li>S Corporation</li> <li>Partnership</li> <li>Trust/Estate</li> <li>Limited liability company, circle the tax classification (C= C Corporation, S= S Corporation, P= Partnership) and enter name of entity as shown on tax return</li> </ul>		
	(please specify)		
	Others, enter name as shown on U.S. federal tax document		
	(please specify)		
2	Enter name as shown on your income tax return (if different from the legal name in Section 1 above):		
	(please specify)		
3	If you are exempt from backup withholding and/or FATCA reporting, enter the code that may apply to you:		
	Exempt payee code       Exemption from FATCA reporting code		
	(please specify) (please specify)		
	Refer to Definitions and Interpretation for list of codes		

### Section 3: For Entity NOT incorporated, organised or operating in the US

3A. Fina	ancial Institution (Select where applicable for FATCA and/or CRS Status)	
		FATCA Status
	<ul> <li>The Entity is a Participating Foreign Financial Institution (FFI), Reporting Model 1 FFI or Reporting Model 2 FFI; and</li> <li>Please provide Its GIIN (Global Intermediary Identification Number):</li> </ul>	Participating FFI Reporting Model 1 FFI Reporting Model 2 FFI
	<ul> <li>Other types of Foreign Financial Institutions (e.g. certified deemed-compliant FFI, sponsored FFI, FI with a Local Client Base, etc.); and</li> <li>Please complete and submit the appropriate IRS Form W-8</li> </ul>	
		CRS Status
	<ul> <li>Investment Entity include the following:</li> <li>Financial Institution Investment Entity (FIIE) – Investment entity managed by another Financial Institution</li> <li>Other Investment Entity</li> </ul>	Investment Entity
	<ul> <li>It is an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution</li> <li>Please also complete Controlling Person Self-Certification Form for all Controlling Persons</li> </ul>	Non-Participating FIIE
	It is a Depository Institution, Custodial Institution or Specified Insurance Company	Financial Institution

3B. Enti	ty Exempted (Select where applicable)	FATCA Status	CRS Status
	Government Entity or Central Bank (or a wholly owned entity of a Governmental Entity / Central Bank)	Entity wholly owned by exempt Beneficial Owners	Government Entity or Central Bank
	International Organisation (or a wholly owned agency of an International Organisation)	International Organisation	International Organisation
	Publicly Listed company or its Related Entity Please provide the name of the established securities market on which the corporation is regularly traded:	Active NFFE Publicly traded NFFE or NFFE affiliated of a public	Publicly traded NFE
	(please specify)	traded corporation	
	If you are a Related Entity of a regularly traded corporation, please provide the name of the regularly traded corporation:		
	(please specify)		

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3C. Nor	-Financial Institution (Select where applicable)	FATCA Status	CRS Status
	Active Business	Active NFFE	Active NFE
	Holding Company of Non-financial Groups	Active NFFE – Excepted Non- financial Group Entity	Active NFE (Others) – Holding NFE of Non-financial group
	Start-up Company	Active NFFE – Excepted Non- financial Start-Up Company	Active NFE (Others) – Start-up NFE
	Liquidating or Emerging from Bankruptcy Company	Active NFFE – Excepted non- financial entity in liquidation or bankruptcy	Active NFE (Others) – Liquidating or emerging from bankruptcy
	Charity/ Non-profit Organisation	Active NFFE – Non- profit Organisation	Active NFE (Others) – Non-profit NFE
	Passive Investment Entity derives more than 50% of its gross income (for the previous calendar year) from passive income such as investments, dividends, interests, rents or royalties	Passive NFFE	Passive NFFE
	Please also complete Controlling Person Self- Certification Form for each Controlling Persons		
	If your FATCA classification is none of the above, kindly complete and submit the appropriate <b>IRS Form</b> <b>W8BEN-E</b>		

#### Section 4: Declaration and Undertaking

I/We understand that the information supplied by me/us is subject to RHB Bank Berhad's Terms and Conditions Governing Accounts, Terms and Conditions Governing the use of RHB Reflex (if applicable) which has been made available to me/us via https://www.rhbgroup.com.sg

I/We acknowledge that the information contained in this form and information regarding my account(s) with you may be provided to IRAS and they may exchange this information with tax authorities of other countries pursuant to intergovernmental agreements to exchange financial account information.

#### I/We declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

I/We undertake to advise you within 30 days of any change in circumstances which affects the tax residency status of the Entitynamed in Section 1 of this form as well as any of its Control Person(s) or causes the information contained herein to become incorrect or incomplete, and to provide you with a suitably updated self-certification and Declaration within 90 days of such change in circumstances.

#### **Definitions and Interpretation**

"Account Holder" means the person listed or identified as the holder of a Financial Account by the Financial Institution that maintains that account. This is regardless of whether such person is a flow-through Entity. Thus, for example, if a trust or an estate is listed as the holder or owner of a Financial Accounts, the trust or estate is the Account Holder, rather than the trustee or the trust's owner or beneficiaries. Similarly, if a partnership is listed as the holder or owner of a Financial Account, the partnerships is the Account Holder, rather than the partners in the partnership.

A person, other than a Financial Institution, holding a Financial Account for the benefit of another person as an agent, a custodian, a nominee, a signatory, an investment advisor, an intermediary, or as a legal guardian, is not treated as the holding the account, and such other person is treated as holding the account.

**"Account Information"** means any information relating to any account of a Customer with any of the RHB Group including without limitation the account number, account balance or value, currency denomination, gross receipts, withdrawals and payments to or from the account and the total gross amount of interest paid or credited to the account.

"Account Business" refers to entity which derives:

• At least 50% of its gross income (for the previous calendar year) from these business activities and not from passive income such as investments, dividends, interests, rents or royalties; and

• At least 50% of the weighted average percentage of assets held by it (tested quarterly, using fair market value or book value of assets as reflected in your balance sheet) produce or are held to produce income for these business activities.

**"Authority"** means any national, state, or local government, any political subdivision thereof, any agency, authority, instrumentality, whether judicial or administrative, regulatory or self-regulatory organisation, law enforcement body, court, central bank or tax or revenue authority in any jurisdiction whether within or outside of Malaysia.

**"C Corporation"** is a legal structure that businesses can choose to organise themselves under to limit their owners' legal and financial liabilities. Generally, all for-profit corporations are automatically classified as a "C Corporation" unless the corporation elects the option to treat the corporation as a flow-through entity known as "S Corporation".

"Charity/ Non-profit Organisation" must be established and maintained exclusively for either:

• religious, charitable, scientific, artistic, cultural or educational purposes; or

• professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civil league or an organisation operated exclusively for promotion of social welfare

The Charity/Non-profit organisation fulfills all the following conditions:

- Exempt from income tax in its jurisdiction of residence; and
- Has no shareholders or members who have a proprietary or beneficial interest in its income or assets; and

• Its formation documents or the local law do not permit the distribution of any income or assets to or applied for the benefit of a private person or non-charity entity, except for payment as reasonable compensation for services rendered or distribution in accordance with the charity's charitable activities; and

• Its formation documents or the local law requires all of the charity's assets to be distributed to a government entity or other nonprofit

organisation upon the charity's dissolution or liquidation.

**"Controlling Person"** are the natural person(s) who exercise control over an entity. Where that entity is treated as a Passive Non-Financial Entity ("Passive NFE") then a Financial Institution is required to determine whether or not these Controlling Persons are Reportable Persons. This definition corresponds to the term "beneficial owner" described in Recommendation 10 and the Interpretative Note on Recommendation 10 of the Financial Action Task Force Recommendations (as adopted in February 2012).

In the case of a trust, the Controlling Person(s) are the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiaries, or any other natural person(s) exercising ultimate effective control over the trust (including through a chain of control or ownership). Under the CRS the settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, are always treated as Controlling Persons of a trust, regardless of whether or not any of them exercises control over the activities of the trust.

Where the settlor(s) of a trust is an Entity then the CRS requires Financial Institutions to also identify the Controlling Persons of the settlor(s) and when required report them as Controlling Persons of the trust.

In the case of a legal arrangement other than a trust, Controlling Person(s) means persons in equivalent or similar positions.

**"Common Reporting Standard (CRS)"** was developed in response to the G20 request and approved by the Organisation for Economic Co-operation and Development (OECD) Council on 15 July 2014, calls on jurisdictions to obtain information from their financial institutions and automatically exchange that information with other jurisdictions on an annual basis. It sets out the financial account information to be exchanged, the financial institutions required to report, the different types of accounts and taxpayers covered, as well as common due diligence procedures to be followed by financial institutions.

**"Corporation that is publicly traded or an affiliate of a publicly traded corporation"** include any corporations which regularly traded its stock on one or more established securities markets; or is an affiliate of an entity which regularly traded their stock on an established securities market.

**"Entity"** means a legal person or a legal arrangement, such as a corporation, organiation, partnership, trust or foundation.

**"Exempt payee code"** is code used for identifying payee that are exempt from backup withholding. Generally, individuals (including sole proprietors) are NOT exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. Corporations are NOT exempt from backup withholding for payments made in settlement of payment card or third party network transactions.

Refer to Form W-9 instructions for more details on list of exempt payees, their codes and which types of payment these codes should be used.

**"Exemption from FATCA reporting code"** is code used for identifying payee that are exempt from reporting under FATCA and applies to person that has accounts maintained outside of the United States by certain foreign financial institutions.

Refer to Form W-9 instructions for more details and to assess if financial institution is subject to these requirements.

"Financial Account" means an account maintained by a Financial Institution and includes: Depository Accounts; Custodial Accounts; Equity and debt interest in certain Investment Entities; Cash Value Insurance Contracts; and Annuity Contracts as defined in FATCA and CRS regulations.

**"Foreign Account Tax Compliance Act (FATCA)"** which was passed as part of the Hiring Incentives to Restore Employment (HIRE) Act, generally requires that foreign financial institutions and certain other non-financial foreign entities report on the foreign assets held by their U.S. account holders or be subject to withholding on withholdable payments. The HIRE Act also contained legislation requiring U.S. persons to report, depending on the value, their foreign financial accounts and foreign assets.

"Foreign Financial Institution (FFI)" refers to a non-US entity that is a financial institution.

"Government Entity or Central Bank (or a wholly owned entity of a Governmental Entity/Central Bank)" include but are not limited to the following:

- · Ministries and their wholly owned and controlled entities; or
- Statutory Bodies and their wholly owned and controlled entities; or
- State Government Authorities and their wholly owned and controlled entities; or
- Local Authorities including City, Municipal and District Councils and their wholly owned and controlled entities.

"Holding Company of Non-financial Groups" refers to entity with following conditions:

• Substantially all (i.e. 80% or more) of the activities of the entity consist of holding the outstanding shares of, or providing financing and services to, one or more subsidiaries that are not FI; and

• It does not function (or hold itself out) as an investment fund, e.g. private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

**"International Organisation (or a wholly owned agency of an International Organisation)"** includes any intergovernmental organisation (or a supranational organisation) that is comprised primarily of governments. It has in effect a headquarters or substantially similar agreement with the jurisdiction, and its income does not inure to the benefit of private person.

"Liquidating or Emerging from Bankruptcy Company" refers to entity which was not an FI in the past five years and is in the

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process of liquidating its assets or is re-organising with the intent to continue or recommence operations in a business other than that of an FI.

**"Participating Jurisdiction"** means a jurisdiction with which an agreement is in place pursuant to which it will provide the information required on the automatic exchange of financial account information set out in the Common Reporting Standard.

**"Passive Income"** refers to sources of income that could include but are not limited to rent, any property income, dividends, royalties and interest as defined in FATCA and CRS regulations.

**"Person"** means an individual, corporation, company, partnership, joint venture, trust, estate, Limited Liability Company, unincorporated organisation or other entity.

**"Personal Information"** in respect of a Customer and any Controlling Person, means: (i) where the Customer and any Controlling Person is an individual, his/her full name, date and place of birth, residential address, mailing address, contact information (including telephone number), and any taxpayer identification number ("TIN"), social security number, citizenship(s), residency(ies) and tax residency(ies) or (if applicable) such other information as the RHB Group may reasonably require regarding such Customer and any Controlling Person; (ii) where the Customer and any Controlling Person is a corporate/entity, its full name, date and place of incorporation or formation, registered address, address of place of business, tax identification number, tax status, tax residency, registered address, address of place of business, tax identification or (if applicable) such other information generate address, address of place of business, tax identification or (if applicable) such other information as the RHB Group may reasonably require regarding each of its substantial shareholders and controlling persons.

**"Related Entity"** is either if the Entity controls the other Entity, or the two Entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the vote and value in an Entity.

**"Residential/Registered/Permanent Address"**. The residential/registered/permanent address MUST be supported by a documentary evidence issued by an authorised government body (e.g. NRIC, passport, business license).

**"RHB"** means RHB Bank Berhad, RHB Securities Singapore Pte Ltd, RHB Asset Management Pte Ltd, RHB Bank Nominees Pte Ltd, and its respective affiliates, holding/subsidiaries, related companies and successors and assigns, where applicable.

**"S Corporation"** are corporations that elect to pass corporate income, losses, deductions and credits through their shareholders for federal tax purpose. The corporation must meet the following requirements to qualify for "S Corporation" status:

- Be a domestic corporation (conducts its affairs in its home country, i.e. US)
- Have only allowable shareholders
  - May be individuals, certain trusts, and estates and
  - May not be partnerships, corporations or non-resident alien shareholders
- Have no more than 100 shareholders
- Have only one class of stock

**"Start-up Company"** refers to entity which was incorporated not more than 24 months prior to the date of this Self-Certification Form and fulfills the following:

- It is just starting and not yet in operations, and has no prior operating history; or
- It is investing capital into assets with the intention to operate a business other than that of a Financial Institution.

**"Tax Information"** in respect of a Customer and any Controlling Person, means: (i) any documentation or information (and accompanying statements, forms, representations, waivers and consents as the RHB Group may from time to time require or as the Customer and any Controlling Person from time to time give) relating directly or indirectly, to the tax status of the Customer or any Controlling Person; (ii) Personal Information of the Customer and any Controlling Person; (iii) Account Information; and (iv) any other information received by an member of the RHB Group in relation to the Customer, including (but not limited to) information collected and maintained pursuant to Anti-Money Laundering/Know Your Customer (AML/KYC) procedures.

**"Tax Resident"** refers to the definition of tax residence by each participating jurisdiction as provided on [http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency/#id.en.347760\]. In general, you will find that tax residence is the country/jurisdiction in which you live. Special circumstances may cause you to be resident elsewhere or resident in more than one country/jurisdiction at the same time (dual residency). For more information on tax residence, please consult your tax advisor or the information at the OECD automatic exchange of information portal mentioned above.

**"TIN"** (including "functional equivalent") means Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such a jurisdiction. Further details of acceptable TINs can be found at the following link

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[https://www.oecd/org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers].

Some jurisdictions do not issue a TIN. However, these jurisdictions often utilize some other high integrity number with an equivalent level of identification (a "functional equivalent"). Examples of that type of number include, for Entities, a Business/company registration code/number.

**"Treasury/Financing Centre of Corporate Group"** refers to entity primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution.

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I/We hereby confirm that the Board Resolution dated	D	D	MM	Y	Y	Y	Y	furnished to the bank has not
been superseded.								

By signing below, I/we confirm that I/we am/are authorised to sign the application form for and on behalf of the company/association/club/society/partnership.

#### Approving person

#### Approving person

Signature	Signature
Date D D M M 2 0 Y Y	Date D D M M 2 0 Y Y
Name	Name
Designation	Designation
NRIC/Passport no.	NRIC/Passport no.
Approving person	Approving person

Signature	
Date D	D M M 2 0 Y Y
Name	
Designatio	n
NRIC/Pass	port no.

## Signature D D M M **2 0** Y Y Date Name Designation NRIC/Passport no.

# RHB Corporate Account Application Form For New Clients / New Account Mandate

For Bank's Use Only						
MAS Industry Code	SSIC Code					
Cost Center	Campaign Code (If applicable)					
Attended by	Approved by					
Staff ID	Staff ID					
Date D D M M 2 0 Y Y	Date D D M M 2 0 Y Y					
Input by account services						
RHB account no.						
Date of account opening D_D_M_M_2_0_Y	Y Created by					
SVS Update on D D M M 2 0 Y						
Input by Transaction banking						
Application ID	Input by Transaction banking					
Remarks						
Remarks						
Remarks Processed by						
Remarks	Name					
Remarks Processed by	Designation					
Remarks Processed by Signature						
Remarks Processed by Signature Verified by	Designation Date					
Remarks Processed by Signature	Designation Date Name					
Remarks Processed by Signature Verified by	Designation Date					

## **RHB Corporate Account Application Form** For New Clients / New Account Mandate

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#### **Details of Directors Whom are Not Authorised Signer**

Director 1 🗌 Dr 🔲 Mr 🗌 Miss 🗌 Mrs 🗌 Mdm 🗌 Others						
Name of Director(As per NRIC/Passport)						
Alias name (if any)			Former name (if any)			
ID Number			pe (NRIC/Passport/FIN)			
Date of Expiry* D D M M Y Y Y Y Date c			of birth D D M M Y Y Y Y			
Country of Birth		Natio	nality			
Other Nationality(ies), if applicable	ID Number		ID Type (NRIC/Passport)	Date of Expiry		
Occupation						
Name of employer						
Nature of employment/business						
Residential address						
Mailing address (if different from residential address)						

#### Director 2 Dr Mr Miss Miss Mrs Mdm Others

Name of Director(As per NRIC/Passport)						
Alias name (if any)			Former name (if any)			
ID Number			pe (NRIC/Passport/FIN)			
Date of Expiry* D D M M Y Y Y Y Date of			f birth D D M M Y Y Y Y			
Country of Birth		Natio	nality			
Other Nationality(ies), if applicable ID Num	nber		ID Type (NRIC/Passport)	Date of Expiry		
Occupation						
Name of employer						
Nature of employment/business						
Residential address						
Mailing address (if different from residential address)						

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#### **Details of Directors Whom are Not Authorised Signer**

Director 3 Dr Mr Miss Mrs Mdm Others						
Name of Director(As per NRIC/Passport)						
Alias name (if any)			Former name (if any)			
ID Number			pe (NRIC/Passport/FIN)			
Date of Expiry* D D M M Y Y Y Y Date o			of birth D D M M Y Y Y Y			
Country of Birth		Natio	nality			
Other Nationality(ies), if applicable	ID Number		ID Type (NRIC/Passport)	Date of Expiry		
Occupation						
Name of employer						
Nature of employment/business						
Residential address						
Mailing address (if different from residential address)						

#### I hereby confirm the above information is accurate

#### Approving person

Signa	ture
Name	5
Date	DDMM20YY

#### Approving person

Signature	
Name	
Date D D M M 2 0 Y Y	

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#### **Declaration of Beneficial Owner(s)**

□ I/We declare that the **Beneficial Owner 1** are as follows:

Name of beneficial owner							
Shareholding (%)			Date of birth D D M M Y Y Y Y				
Alias name (if any)			Former Name (if any)				
ID number			Nationality				
ID Type (NRIC/Passport/FIN)			of Expiry* D D M M	YYYYY			
Other Nationality(ies) 🗌 Yes, pls pr	ovide details below	No					
Nationality(ies), if applicable	ID Number		ID Type (NRIC/Passport)	Date of Expiry			
Name of employer							
Nature of employment/business							
Occupation							
Residential address							
Mailing address (if different from residentia	l address)						

#### ☐ I/We declare that the **Beneficial Owner 2** are as follows:

Name of beneficial owner						
Shareholding (%)		Date of birth D D M M Y Y Y Y				
Alias name (if any)		Former Name (if any)				
ID number			nality			
ID Type (NRIC/Passport/FIN)			of Expiry* D D M M	YYYYY		
Other Nationality(ies) 🗌 Yes, pls pr	ovide details below	No				
Nationality(ies), if applicable	ID Number		ID Type (NRIC/Passport)	Date of Expiry		
Name of employer						
Nature of employment/business						
Occupation						
Residential address						
Mailing address (if different from residentia	Mailing address (if different from residential address)					

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#### **Declaration of Beneficial Owner(s)**

□ I/We declare that the **Beneficial Owner 3** are as follows:

Name of beneficial owner				
Shareholding (%)		Date of birth D D M M Y Y Y Y		
Alias name (if any)		Former Name (if any)		
ID number		Nationality		
ID Type (NRIC/Passport/FIN)		Date of Expiry* D D M M Y Y Y Y		
Other Nationality(ies) 🗌 Yes, pls pr	ovide details below	No		
Nationality(ies), if applicable	ID Number		ID Type (NRIC/Passport)	Date of Expiry
Name of employer				
Nature of employment/business				
Occupation				
Residential address				
Mailing address (if different from residential address)				

#### □ I/We declare that the **Beneficial Owner 4** are as follows:

Name of beneficial owner				
Shareholding (%)		Date of birth D D M M Y Y Y Y		
Alias name (if any)		Former Name (if any)		
ID number		Nationality		
ID Type (NRIC/Passport/FIN)		Date of Expiry* D D M M Y Y Y Y		
Other Nationality(ies)  Yes, pls provide details below  No				
Nationality(ies), if applicable	ID Number		ID Type (NRIC/Passport)	Date of Expiry
Name of employer				
Nature of employment/business				
Occupation				
Residential address				
Mailing address (if different from residential address)				

\*(Not applicable for NRIC)

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#### □ I/We declare that the Company is ultimately owned by the below entity

Name				
Registration Number	Country of Incorporation			
Registered Address				
Mailing Address (if different from Registered Address)				
Nature of Business	Shareholding (%)			

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#### Appendix 01: Additional Authorised Signatories / Reflex Internet Banking Users

Reflex service package details: User(s) will be issued with Hardware / Digital Token (Secure Plus) to access Reflex. Free for the first 2 hardware tokens at point of application only. Subsequent hardware token at S\$20 (GST inclusive) each.

Dr Mr Miss Mrs Mdm Others				
Name (as per ID Document) Former Name (if any)				
Alias (if any)				
ID Number	Date of birth D D M M Y Y Y Y			
ID Type (NRIC/Passport/FIN)				
Country of birth	Nationality			
Other Nationality(ies), if applicable ID Number	ID Type (NRIC/Passport) Date of Expiry			
Name of employer	Nature of employment/business			
Designation	Email			
Residential Address				
Mailing Address (if different from residential address)				
For transaction related enquiries and to receive SMS notifications. Country code Area code Contact number				
Mobile no + -				
Office phone no +				
Fax phone no +				
Set as Authorised Signatory				
	Assign signing group (Optional)			
	O A O B O C			
<ul> <li>Contact Person</li> <li>Set as Reflex Internet banking User for new Business Internet Banking customer only.</li> </ul>				
Preferred User ID (6-18 alphanumeric characters)				
Select Customised role type# (Select one role)         Maker       Authoriser       Reviewer (Optional)         Administrator 1 (Maker)       Administrator 2 (Authoriser)       Inquirer (Optional)         Single Control access       Administrator 1 (Maker) with Financial Transaction         Administrator 2 (Authoriser) with Financial Transaction				

For New Clients / New Account Mandate

#### Appendix 01: Additional Authorised Signatories / Reflex Internet Banking Users

Reflex service package details: User(s) will be issued with Hardware / Digital Token (Secure Plus) to access Reflex. Free for the first 2 hardware tokens at point of application only. Subsequent hardware token at \$\$20 (GST inclusive) each.

Select Reflex Token Type (select one option)				
Hardware Token	📃 Digital Token (Secur	e Plus)		
Account Access	-			
All Account(s)	Specific Account(s)			
Indicate signing group (Optional)				
○ A ○ B ○ C ○ Others				

• Authoriser: Approve Transactions

# Please read the notes below before filling up the appropriate section.

- Maker: Create Transactions
- Single Access Control: Same user will initiate and approve all transactions. Option defaults to only 1 user allowed for system access.
- Inquirer: View account details only
- Administrator with Financial Transaction: Perform user security administrations and create or approve transactions
- Reviewer: Review transactions submitted by Maker Administrator: Only perform user security administrations