

INTER~PACIFIC

EQUITY NOMINEES (TEMPATAN) SDN BHD

(Company no. 178048-D)

(Formerly known as Inter-Pacific Equity Nominees Sdn.Bhd.)

APPLICATION FOR OPENING OF NOMINEES/CUSTODY ACCOUNT

Name			
Date of Birth		Old NRIC/ Passport No.	
Sex	Male/ Female*	New NRIC No.	
Nationality			
Date and Place of Incorporation (Co.)		Registration No. (For Corporate Only)	
Home/Registered Address			Fax No : Tel No :
Office/Business Address			Fax No : Tel No :
Mailing Address	Home/ Office*	Contact Person (For Corporate only)	:

*Delete whichever not applicable

DECLARATION

I/We hereby

1. request to open an account and undertake to abide by all Law, Rules and Regulations in force and any subsequent new rules and/or regulations that may be brought into force from time to time.
2. undertake to keep you fully indemnified against all expenses, losses and damages resulting from my/our failure to comply with the terms and conditions herein and disclosure of any wrongful information herein.
3. agree that the posting by ordinary mail by you to me/us at the mailing address hereinbefore stated or at the last known address of any notification and/or other documents shall be deemed to have been duly received by me/us in the ordinary course of post.
4. accept that any Statement of Account certified by any officer and/or representative of your Company as to the liabilities and the balance for the time being due and owing to your company shall be conclusive evidence of the amount of my/our indebtedness in any legal proceedings against me/us.
5. authorise you to verify all such information herein stated and understand that I/we may be required to provide such other information related to our particulars contained herein deemed appropriate for the purpose of this application.
6. agree to pay you such handling and service charges and late payment charges to be determined by you from time to time, within such time limit as may be permitted by you.
7. undertake to provide and attach herewith the following:-

For individual applications: -

- (a) copy of identity card/passport and
- (b) copy of Power of Attorney (if applicable).

For Corporate applications: -

- (a) a certified true copy of our Memorandum and Article of Association
- (b) a certified true copy of our Company's Board Resolution empowering and authorising the persons state therein to execute the application form and Letter Of Indemnity and to give instructions orally or in writing to you in relation to all transactions entered into or made for our account;
- (c) a certified true copy of Particulars of directors, managers and secretaries (Form 49)
- (d) a certified true copy of our Certificate of Incorporation (Form 8 or 9)-I and
- (e) a certified true copy of Notice of Situation of Registered Office (Form 44).

NB: Corporations not incorporated pursuant to the Companies Act, 1965 and foreign applicant must submit documents which are equivalent to the above when opening account.

8. inform you of any changes in corporate particulars in writing (corporate application only).
9. declare that all information given herein are true and correct.

10. authorise the following person(s) to deposit/ transfer/ withdraw my/our shares on my/our behalf (if any)

<u>NAME</u>	<u>NRIC/ PASSPORT NO.</u>	<u>DESIGNATION</u>	<u>SIGNATURE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Please enclose the relevant documents) to verify the above eg. Board Resolution/ Power of Attorney)

Signature of Applicant (Authorised Signatories)	Witnessed by
Name : NRIC No : Date :	Name : NRIC No : Date :

Introduced by :	Client/Remisier Code :
Signature :	NRIC No : Address :
	Tel No (H) : Tel No (O) :
Date :	Fax No :

FOR OFFICIAL USE ONLY	
Reviewed by : Nominees/ Custody Dept.	If for retail Trading limit or secured Against Losses.
Purpose : Retail Trading Limit <input type="checkbox"/>	Recommended by : Credit Control Dept.
Secured Against Losses <input type="checkbox"/>	
Custody only <input type="checkbox"/>	
Signature : _____	Signature : _____
Date : _____	Date : _____
Approved by General Manager/ Director	Processed by : CDS Dept.
Signature : _____	Signature : _____
Date : _____	Date : _____
Account Name	
Account Qualifier	
CDS Account No	
Trading Client Code (if any)	