

SUBMISSION CHECKLIST (FOR ORIGINAL FORMS)

To: UOB Kay Hian
8 Anthony Road #01-01 Singapore 229957

Attn: Chai Lit Foong
Tel: 6590 6820

Submitted By FA Firm : _____

FA Firm Contact : _____

FA Firm Email : _____

S/N	Name of Applicant (Full name as in application form)	NRIC / Other ID No.	Name of Adviser	Adviser Code	Type Of Account(s) To Be Opened		Remarks
					CIS	Referral	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Important Notes: 1. Please ensure that the application forms have been **signed clearly by applicant (Original Signature)**. All amendments are counter-signed by applicant.
2. Please ensure that all required documents submitted are clear and complete.
3. Incomplete or unclear application forms and/or documents will be rejected.

I/We confirm that I/We have checked through the forms to ensure that our advisers have witnessed the signing of the application forms and certified true copy on all supporting documents. We are submitting _____ sets of forms to UOB Kay Hian.

Confirmed by (at least one authorized signatory)

Name of Authorised Signatory, Signature and Company Stamp

Date