Customer Particulars Form KYC for Corporate & Trading Authorisation



| COMPANY'S PARTICULARS | | | | |
|--|---|--|--|--|
| Registered Name: COMPASS ENERGY PTE LTD | | | | |
| Registered Address: | | | | |
| 12 TUAS AVENUE 1. SINGAPORE 639497 | | | | |
| Business Address; | | Same as Registered Address | | |
| 177 | | | | |
| Tel No.: 6376 1311 | Fax No.: 6271 4311 | Email Address: Joyce Teo@: Compassenergy. Com | | |
| Place of Registration: | Date of Registration: | Registration No.: | | |
| Singapore | 28 March 2003 | 2003 02890M | | |
| Type of Entity: | | | | |
| ☐ Sole Proprietorship ☐ Partnership | | | | |
| ☐ Limited Liability Partnership ☐ Express Trust | | | | |
| ☐ Others (Please Specify): | 6 | | | |
| Purpose and Intended Nature of Account Relationship and/or Relevant Business Transaction Undertaken | | | | |
| Provide information on the purpose and intended nature of the account relationship and/or relevant business transaction undertaken. | | | | |
| Please also state whether the transaction | on is for money-changing and/or for ren | nittance purposes. | | |
| Forex Transaction : | | | | |
| SOURCE OF FUNDS | | | | |
| ☐ Bank Credit Line Directors' / Shareholders' / Sole Proprietor's Investments | | | | |
| Others (Please Specify): Business operating Income | | | | |
| POLITICALLY EXPOSED INDIVIDUALS: | | | | |
| Is the beneficial owner or has the beneficial owner ever been entrusted with prominent public functions, whether in Singapore, in a foreign country, or in an international organisation? Yes | | | | |
| 2. Is the beneficial owner or has the beneficial owner ever been a parent/ step-parent/ step-child, adopted child/ spouse/ sibling/ step-sibling/ adopted sibling of anyone who is or has been entrusted with prominent public functions, whether in Singapore, in a foreign country, or in an international organisation? | | | | |
| ☐ Yes | ☐ Yes No | | | |
| 3. Is the beneficial owner or has the beneficial owner ever been closely connected, either socially or professionally with anyone who is or has been entrusted with prominent public functions, whether in Singapore, in a foreign country, or in an international organisation? | | | | |
| □ Yes No | | | | |
| | | | | |
| Are you an agent acting on behalf of the customer? If yes, please complete the following: | | | | |
| Name of Entity/Individual: (Please Circle | e) NIA | | | |
| Address: WIR | | | | |
| Place of Registration/Nationality: | Registration No. /Identification | No.: Date of Registration/ Date of Birth: | | |
| Relationship between Agent and Client: | Basis of Authority (E.g Letter of | Basis of Authority (E.g Letter of authorisation or board resolution, please attach): | | |
| · | | | | |

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Appointment of staff acting on behalf of company to trade with Great East Forex

| Appointment of stuff acting on benuit of company to trade with Great East Forex | | | |
|---|--|------------------------------|--|
| 1) AUTHORISED TRADING | S PERSONNEL STATE OF THE STATE | | |
| Full Name: | | IC/Passport No.: 574 34416 2 | |
| Teo | lian Na | Nationality: Singaporean | |
| Job Title: Finance manager | | Specimen Signature: | |
| 2) AUTHORISED TRADING | PERSONNEL | | |
| Full Name: | | IC/Passport No.: 581646212 | |
| Ellin | ph Rosivawani | Nationality: Indonesian | |
| Job Title: | countaint | Specimen Signature: | |
| 3) AUTHORISED TRADING | G PERSONNEL CONTROL CO | | |
| Full Name: | | IC/Passport No.: | |
| | | Nationality: | |
| Job Title: | | Specimen Signature: | |
| relationship are not derived AUTHORISING OFFICER | Name of Director Hans Sacob Huide Signature of Director and Company Stamp | Date: 31 Dec 2017. | |
| | (33 5540 | | |
| DOCUMENT CHECKLIST | | | |
| ☐ Form completed and signed by Authorizing Director | | | |
| Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of all the <u>Authorised</u> <u>Trading Persons</u> | | | |
| Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of <u>Director(s)</u> | | | |
| ☐ Company business profile from ACRA of not later than 6 months | | | |
| | | | |
| FOR GEF USE ONLY: | | | |
| Remarks: | | Verified By: | |
| | | Date | |