



Company's Particulars			
Registered Name: LC Maritime Singapore Pte Ltd			
Registered Address: BK 512 #07-327 Dunlop West St. #2 SC 640552			
Tel No.: 98185347	Fax No.: -	Business No.: 201000435N	
Authorized Contact Persons:	Contact No.:	Job Title:	Nationality:
1. Chong Ming Kuan	-	Director	Malaysia
2.			
3)			

Document Checklist for Opening New Company Account

<input type="checkbox"/> Updated list of <u>Authorised Contact/Trading Persons</u>	Date Last Updated:
<input type="checkbox"/> Account Opening Form completed and signed by <u>Authorizing Director</u> or Manager (subject to approval)	
<input type="checkbox"/> Photocopy of identity card (or passport for non-Singaporean) with photograph of ALL the Authorised Trading Persons	
<input type="checkbox"/> Photocopy of identity card (or passport for non-Singaporean) with photograph of <u>Director(s)</u>	
<input type="checkbox"/> Company business profile from ACRA of not later than 6 months	

For GEF use only:

Remarks:	Verified by: <i>Law Kemp</i>
	Date: 28/11/16

Customer Particulars Form
KYC for Corporate & Trading Authorisation



大東外匯機構
 Great East Forex

COMPANY'S PARTICULARS		
REGISTERED NAME: LC MARITIME SINGAPORE PTE LTD (under Trust maritime services)		
REGISTERED ADDRESS: Block 552, #07-327 Jurong West St. 42, Singapore 640552		
BUSINESS ADDRESS: 8, Juhong Town Hall Rd The JTC Summit, S 609434 <input checked="" type="checkbox"/> SAME AS REGISTERED ADDRESS		
TEL NO.: 98185347	FAX NO.: -	EMAIL ADDRESS: lc.maritimesingapore@gmail.com
PLACE OF REGISTRATION: SINGAPORE ACRA	DATE OF REGISTRATION: 06/01/2010	REGISTRATION NO.: 201000435N
TYPE OF ENTITY: <input type="checkbox"/> COMPANY <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> LIMITED LIABILITY PARTNERSHIP <input type="checkbox"/> EXPRESS TRUST <input type="checkbox"/> OTHER LEGAL ARRANGEMENT (Please Specify): _____ <input type="checkbox"/> OTHERS (Please Specify): _____		
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 is for money-changing and/or for remittance purposes.		
MARINE CONSULTANCY SALE & PURCHASE BROKERAGE		
SOURCE OF FUNDS <input type="checkbox"/> BANK CREDIT LINE <input type="checkbox"/> DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS <input checked="" type="checkbox"/> OTHERS (Please Specify): _____		
POLITICALLY EXPOSED INDIVIDUALS: 1. 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are you an agent acting on behalf of the customer? If yes, please complete the following:		
NAME OF ENTITY/INDIVIDUAL: (Please Circle)		
ADDRESS:		

Customer Particulars Form
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大東外匯機構
Great East Forex

PLACE OF REGISTRATION/NATIONALITY:	REGISTRATION NO. /IDENTIFICATION NO.:	DATE OF REGISTRATION/ DATE OF BIRTH:
RELATIONSHIP BETWEEN AGENT(S) AND CLIENT:		BASIS OF AUTHORITY(E.g Letter of authorisation or Board resolution, please attach):

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

1) AUTHORISED TRADING PERSONNEL	
FULL NAME: CHONG MING KWAI	IC/PASSPORT NO.: S2584501C
	NATIONALITY: SINGAPOREAN
JOB TITLE:	SPECIMEN SIGNATURE:
2) AUTHORISED TRADING PERSONNEL	
FULL NAME:	IC/PASSPORT NO.:
	NATIONALITY:
JOB TITLE:	SPECIMEN SIGNATURE:

DECLARATION:

I/We have furnished the above information to the best of my knowledge, information and belief, and will duly inform Great East Forex in writing if there are any changes to be made to this form. I further confirm that the funds in relation to these transactions or account relationship are not derived from any criminal activities or intended for any criminal use.

AUTHORISING OFFICER	NAME OF DIRECTOR CHONG MING KWAI	NRIC NO.: S2584501C
	SIGNATURE OF DIRECTOR AND COMPANY STAMP 	DATE: 27/10/2016

DOCUMENT CHECKLIST	
<input checked="" type="checkbox"/>	Form completed and signed by Authorizing Director
<input type="checkbox"/>	Photocopy of Identity Card (or Passport and valid Working Pass for non-Singaporean) with photograph of all the <u>Authorised Trading Persons</u>
<input type="checkbox"/>	Photocopy of Identity Card (or Passport and valid Working Pass for non-Singaporean) with photograph of <u>Director(s)</u>
<input type="checkbox"/>	Company business profile from ACRA of not later than 6 months

FOR GEF USE ONLY:	
REMARKS:	VERIFIED BY:
	DATE: 22/11/16