



Company's Particulars			
Registered Name: TAQWA Foreign Exchange			
Registered Address: 128 Syed Alwi Rd SC 2076921			
Tel No.: 6288 5242	Fax No.: —	Business No.: 5289234 LV	
Authorized Contact Persons:	Contact No.:	Job Title.:	Nationality:
1. Ahamed Shaffath	—	Director	Singaporean
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: Sow Leng
	Date: 6/1/17

Customer Particulars Form KYC for Corporate & Trading Authorisation



大東外匯機構
Great East Forex

COMPANY'S PARTICULARS		
REGISTERED NAME: <u>Toong Foreign Exchange</u>		
REGISTERED ADDRESS: <u>128 Syed Alwi Road, S'PORE 207692</u>		
BUSINESS ADDRESS: <u>128 Syed Alwi Road, S'PORE 207692</u>		<input checked="" type="checkbox"/> SAME AS REGISTERED ADDRESS
TEL NO.: <u>62955242</u>	FAX NO.: <u>-</u>	EMAIL ADDRESS: <u>itoguna@hotmail.com</u>
PLACE OF REGISTRATION: <u>Singapore</u>	DATE OF REGISTRATION:	REGISTRATION NO.:
TYPE OF ENTITY:		
<input type="checkbox"/> COMPANY <input type="checkbox"/> SOLE PROPRIETORSHIP <input checked="" type="checkbox"/> PARTNERSHIP <input 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.		
<u>Transaction is intended for money changing purpose</u>		
SOURCE OF FUNDS		
<input type="checkbox"/> BANK CREDIT LINE <input checked="" type="checkbox"/> DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS <input checked="" type="checkbox"/> OTHERS (Please Specify): <u>FROM BUSINESS</u>		
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 KYC for Corporate & Trading Authorisation



大東外匯機構
Great East Forex

PLACE OF REGISTRATION/NATIONALITY: <u>Singapore / Singaporean</u>	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: <u>Ahamed Shaffath</u> ✓	IC/PASSPORT NO.: <u>S6878852H</u> ✓
JOB TITLE: <u>Director</u>	NATIONALITY: <u>S'POREAN</u>
	SPECIMEN SIGNATURE: <u>[Signature]</u>
2) AUTHORISED TRADING PERSONNEL	
FULL NAME: <u>Ahamed Shaffath</u> ✓	IC/PASSPORT NO.: <u>S6878852H</u> ✓
JOB TITLE: <u>Director</u>	NATIONALITY: <u>S'POREAN</u>
	SPECIMEN SIGNATURE: <u>[Signature]</u>

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 <u>AHAMED SHAFFATH</u> ✓	NRIC NO.: <u>S6878852H</u> ✓
	SIGNATURE OF DIRECTOR AND COMPANY STAMP <u>[Signature]</u>	DATE: <u>6/0/17</u>

DOCUMENT CHECKLIST FOR OPENING NEW COMPANY ACCOUNT	
<input type="checkbox"/>	Account opening 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: <u>L.</u>
	DATE: <u>04/01/17</u>