Customer Particulars Form KYC for Corporate & Trading Authorisation



COMPANY'S PARTICULARS					
REGISTERED NAME:					
Borden Company (Private) Limited					
REGISTERED ADDRESS:					
9 Jalan Kilang #07-01 Borden Centre S 159409					
BUSINESS ADDRESS:		☑ SAME AS REGISTERED ADDRESS			
TEL NO.:	FAX NO.:	EMAIL ADDRESS:			
62726022	62731328	shirley@bordeneagle.com.sg			
PLACE OF REGISTRATION:	DATE OF REGISTRATION:	REGISTRATION NO.:			
Singapore	26/03/1960	196000026W			
TYPE OF ENTITY:		1			
₩ COMPANY	☐ SOLE PROPRIETORSHIP	□ PARTNERSHIP			
☐ LIMITED LIABILITY PARTNERSHIP		☐ EXPRESS TRUST			
	Please Specify):	_			
	nt Relationship and/or Relevant Busine				
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.					
-Currency exchange rate for operational use					
-Remittance					
SOURCE OF FUNDS					
☐ BANK CREDIT LINE ☐ DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS					
☑ OTHERS (Please Specify): Revenue Income					
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?				
☐ Yes	. No				
 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 					
	g, adopted sibiling of anyone who is a apore, in a foreign country, or in an ir				
Yes	√ No	itemations organisation.			
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 internation Yes	_				
	₩ No				
Are you an agent acting on behalf of the customer? If yes, please complete the following:					
NAME OF ENTITY/INDIVIDUAL: (Please Circle)					
ADDRESS:					

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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 o	f company to trade w	ith Great East Forex				
1) AUTHORISED TRADING PERSONNEL						
FULL NAME:			IC/PASSPORT NO.: S8173379A			
SHIRLEY HALIM			NATIONALITY: SINGAPOREAN			
JOB TITLE:			SPECIMEN SIGNATURE:			
FINANCE MANAGER			the transfer			
			1 4º St			
2) AUTHORISED TRADING PERSONNEL			Le/pagger No. Condender			
FULL NAME:			IC/PASSPORT NO.: S0016019I			
PETER SIM JIN TECK			NATIONALITY: SINGAPOREAN			
JOB TITLE:			SPECIMEN SIGNATURE:			
OPERATION MANAGER			Simely			
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 Tan Tak Tho SIGNATURE OF DIRECTOR AND COMPANY STAMP PROPRIED ON TO STAMP DOCUMENT CHECKLIST FOR OPENING NEW COMPANY ACCOUNT						
Account opening 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 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:			
F.						

DATE: