Customer Particulars Form KYC for Corporate & Trading Authorisation



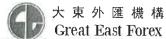
COMPANY'S PARTICULARS						
REGISTERED NAME:						
YORK HOTEL (PRIVATE) LIMITED						
	ount Elizabeth #02-00 Hotel, Singapore 228516	A*,				
BUSINESS ADDRESS:		☐ SAME AS REGISTERED ADDRESS				
TEL NO.:	FAX NO.:	EMAIL ADDRESS:				
(65) 68301140	(65) 67380248	vincent.tan@yorkhotel.com.sg				
PLACE OF REGISTRATION:	DATE OF REGISTRATION:	REGISTRATION NO.:				
Singapore	7 February 1969	196900074M				
TYPE OF ENTITY:						
│ □X COMPANY	☐ SOLE PROPRIETORSHIP	☐ PARTNERSHIP				
│ │ □ LIMITED LIABILITY PARTNE	ERSHIP	☐ EXPRESS TRUST				
OTHER LEGAL ARRANGEMENT (Please Specify):						
	Account Relationship and/or Relevant Busic					
Provide information on the purpo	se and intended nature of the account relation	onship and/or relevant business transaction undertaken.				
Please also state whether the tran	nsaction is for money-changing and/or for re	mittance purposes.				
For	money-changing					
	, , ,					
SOURCE OF FUNDS						
	□ BANK CREDIT LINE □ DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS					
☐ OTHERS (Please Specify): _						
POLITICALLY EXPOSED INDIVIDUA	LS:					
1. Is the beneficial owner	er 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	Ŭ No					
2. Is the beneficial owner	er or has the beneficial owner ever been	a parent/sten-parent/sten-child, adopted child/				
 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	□X 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 inter	rnational organisation? [X] No					
Are you an agent acting on behalf of the customer? If yes, please complete the following: NAME OF ENTITY/INDIVIDUAL: (Please Circle)						
Not Applicable						
ADDRESS:						

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A subsidiary company of **Great East Enterprise Pte Ltd** *Reg No.:* 40238800C 101 Beach Road, #02-02 The 101, Singapore 189703 Tel: +65 6339 2828 Fax: +65 6334 2013 GEF/AML/CFT/02/2016/KYC FORM A



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PLACE OF REGIST	RATION/NATIONALITY	: REGISTRATION N	O. /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 beh	alf of company to trac	de with Great East Forex		
) AUTHORISI	ED TRADING PERSO	NNEL			
ULL NAME:				IC/PASSPORT NO.: S0131013E NATIONALITY:	
OB TITLE:	LE: Chief Cashier			Singaporean SPECIMEN SIGNATURE:	
) AUTHORISI	D TRADING PERSO	NNEL			
ULL NAME: K	NAME: Kee Chooi Lin			IC/PASSPORT NO.: S1425414E NATIONALITY:	
OB TITLE:	Confidential Administrative Assistant			Singaporean SPECIMEN SIGNATURE:	
AUTHORISING OFFICER	RISING OFFICER NAI	ME OF DIRECTOR Khoo Eliza	beth	NRIC NO.: S1348179B	
	SIG	NATURE OF DIRECTOR AN	ND COMPANY STAMP	DATE:	
		22	ر	10 June 2016	
DOCUMENT CHE	CKLIST FOR OPENING	NEW COMPANY ACCOU	NT		
☐ Accour	ccount 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>				
□ Photoc	opy of Identity Card (o	or Passport and valid Wor	king Pass for non-Singapore	an) with photograph of <u>Director(s)</u>	
□ Compa	ny business profile fro	m ACRA of not later than	6 months		
OD CEE USE ST	IV.				
FOR GEF USE ON	LY:				
REMARKS:				VERIFIED BY:	
				DATE:	

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