Customer Particulars Form KYC for Corporate & Trading Authorisation



COMPANY'S PARTICULARS				
Registered Name: ORIENT ME	ARITIME AGENCIES	PTE LTD		
Registered Address:				
1 COMMONWEALTH LANE, # 06-15, ONE COMMONWEALTH BLDG, SIT9544				
Business Address:		☑ Same as Registered Address		
Tel No.: 68162228	× No.: 64750228	Email: 15 @ orientagencies.com		
Place of Registration: Da	Date of Registration: Registration No.:			
SINCAPORE	03/09/2015	201533739 D		
Type of Entity:				
	☐ Sole Proprietorship ☐	J Partnership		
☐ Limited Liability Partnership	□ Express Trust			
☐ 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.				
CASH TO WASTER (CTM) DENOMINATION EXCHANGE SERVICES				
SOURCE OF FUNDS				
Bank Credit Line Directors' / Shareholders' / Sole Proprietor's Investments				
Others (Please Specify):				
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 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? Yes No				
 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 arting on habelf of the sustance? If you along any late the fall wife.				
Are you an agent acting on behalf of the customer? If yes, please complete the following: Name of Entity/Individual: (Please Circle)				
- NA				
Address:				
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 authorisation or board resolution, please attach):			

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Appointment of staff acting on behalf of company 1) AUTHORISED TRADING PERSONNEL	to trade with dreat tust totex	
Full Name:	IC/Passport No.:	Nationality:
LAKHBIR SINGH M TARA SINGH	525980985	MALAYSIAN (5 YORE PR
Email: 150 otientagencies : com	Contact No.: 91151099	Job Title:
Specimen Signature:	~/~	☑ Main Contact Person for GEF account enquiries
2) AUTHORISED TRADING PERSONNEL		
Full Name:	IC/Passport No.:	Nationality:
KATE NEO PLAY LE!	57420320E	SINCAPOREAN
Email: Kn @ orientagencies, com	Contact No.: 96722482	Job Title:
Specimen Signature:		☐ Main Contact Person for GEF account enquiries
3) AUTHORISED TRADING PERSONNEL		THE MEN TO BY THE STATE OF THE STATE OF
Full Name:	IC/Passport No.:	Nationality:
Email:	Contact No.:	Job Title:
Specimen Signature:		☐ Main Contact Person for GEF account enquiries
relationship are not derived from any criminal activi AUTHORISING OFFICER Name of Director:		
LACHBIL SINGH M TARA SING	IC/Passport No.:	Nationality:
	25180182	macays, An (c'fore pr
Email: 150 orientagencies, com	Contact No.: 91151099	Main Contact Person for GEF account enquiries
Signature of Director and Company Stamp:	WE AGEN	Date:
Sm/s	Reg. No. 201533739D	10/2/2018
DOCUMENT CHECKLIST	(2)	
Form completed and signed by Authorizin	g Director	
Photocopy of Identity Card (or Passport A Trading Persons	ND valid Working Pass for non-Singapo	orean) with photograph of all the <u>Authorised</u>
Photocopy of Identity Card (or Passport Al	ND valid Working Pass for non-Singapo	orean) with photograph of <u>Director(s)</u>
Company business profile from ACRA of no	ot later than 6 months	
FOR GEF USE ONLY:		
FOR GEF USE ONLY: Remarks:		Verified By: