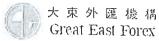
Customer Information (Company) For Internal Use only



Χ		163	1
Con	npamy's Particu	la)rs	
Registered Name: GENERA	L FILTER	e PTE. LT	D
Registered Address: 2 Simb c Gemini	6) sinus s	C 38+29A)
Tel No.: Fax No.:	В	usiness No.:	
6737 3033 6734	9619	201205	202H
Authorized Contact Persons:	Contact No.:	Job Title.:	Nationality:
1. Chua Hown Emp, soph	ie	Alcs MPT	Spicesin
1. Chua Hour Eng, soph 2. Chang Ling Seon		Director	4
3)			
Document Checklist for Opening No	ew Company Acco	ount	
☐ Updated list of <u>Authorised Cor</u>	tact/Trading Perso	ns Date L	ast Updated:
Account Opening Form completion (subject to approval)	eted and signed by	Authorizing Directo	or tvianager
Photocopy of identity card (or the Authorised Trading Person	CHIES OF STATES AND STATES OF THE STATES OF	ingaporean) with p	hotograph of ALL
Photocopy of identity card (or Director(s)	passport for non-S	ingaporean) with p	hotograph of
☐ Company business profile from	n ACRA of not later	than 6 months	
			A PARTY OF THE PAR
For GEF use only:			
Remarks:		Verific	ed by: Sow Lenf
		Date:	50w lang 15/19/17



Customer Particulars Form KYC for Corporate & Trading Authorisation



COMPANY'S PARTICULARS		
REGISTERED NAME:	65:1680	
	CIENTERAL FILTER PT	E LTD
REGISTERED ADDRESS:	2 Sims close #02-0	
	2 Sims Close #02-0 Gernini @ Sims Singapo	ove 387298
BUSINESS ADDRESS:	0	SAME AS REGISTERED ADDRESS
		January No.
TEL NO.:	FAVAIO	
67373033	FAX NO.: 6734 9619	EMAIL ADDRESS:
PLACE OF REGISTRATION:	DATE OF REGISTRATION:	SOPHIA FILTER · com · sa
SINGAPORE		
	2012 APRIL	2012092021
TYPE OF ENTITY:		
COMPANY	☐ SOLE PROPRIETORSHIP	PARTNERSHIP
☐ LIMITED LIABILITY PAR	TNERSHIP	□ EXPRESS TRUST
☐ OTHER LEGAL ARRANG	SEMENT (Please Specify):	C EXTRESS TROST
☐ OTHERS (Please Specifi		
Provide information on the nu	of Account Relationship and/or Relevant Busine	ess Transaction Undertaken
Please also state whether the	rpose and intended nature of the account relation transaction is for money-changing and/or for rem	ship and/or relevant business transaction undertaken.
		titorite purposes.
Rupchase of	FILTERS	
COURCE OF FUNDS		
SOURCE OF FUNDS BANK CREDIT LINE	DIRECTORS' / SHAREHOLDE	RS' / SOLE PROPRIETOR'S INVESTMENTS
☐ OTHERS (Please Specify		KS / SOLE PROPRIETOR'S INVESTMENTS
(*************************************		
POLITICALLY EXPOSED INDIVID	DUALS	
1. Is the beneficial ov	wner or has the beneficial owner ever been a	entrusted with prominent public functions, whether
in Singapore, in a	foreign country, or in an international organi	sation?
☐ Yes	☑ No	
2 Is the beneficial or	where or has the honoficial owner are the second	
spouse/ sibling/ st	ep-sibling/adopted sibling of anyone who is	parent/ step-parent/ step-child, adopted child/ or has been entrusted with prominent public
functions, whethe	r in Singapore, in a foreign country, or in an i	nternational organisation?
☐ Yes	No	5
3. Is the beneficial ov	upon ou bookles bouse?	
with anyone who i	wher or has the beneficial owner ever been o	losely connected, either socially or professionally lic functions, whether in Singapore, in a foreign
country, or in an ir	nternational organisation?	nic functions, whether in Singapore, in a foreign
☐ Yes	No	
Are you an agent acting on be	chalf of the customer? If yes, please complete the	e following:
NAME OF ENTITY/INDIVIDUAL	: (Please Circle)	- Jonomaig.
	•	- NA -
AUUKESS:		
		-NA-

Page 1 of 2

YC for Corporate & Tr PLACE OF REGISTRATION/NATIONA		The state of the s	ADENTIFICACIONE DE LA COMPANION DE LA COMPANIO	Great East Fore	
LACE OF REGISTRATION/NATIONA	ALITY:	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 L) AUTHORISED TRADING PER			with Great East Forex		
FULL NAME: CHUA HUON ENT SOPHA				IC/PASSPORT NO.: S7109637 H NATIONALITY: SINGAPOREAN	
JOBTITLE: ADMIN & ACCOUNTS MANAGER				SPECIMEN SIGNATURE:	
AUTHORISED TRADING PER	RSONNE	L			
CHANG LING SEOW /				IC/PASSPORT NO.: STO14168Z NATIONALITY: SINGA PORGAN	
OB TITLE:				SPECIMEN SIGNATURE:	
withing if there are any changes to	be made Iny crimin	to this form. I further on the following the	confirm that the funds in d for any criminal use.	relation to these transactions or account	
I/We have furnished the above info writing if there are any changes to relationship are not derived from a	ne made iny crimin NAME O	of this form. I further of the following activities or intended of the DIRECTOR	confirm that the funds in d for any criminal use.	relation to these transactions or account NRIC NO.:	
I/We have furnished the above info writing if there are any changes to relationship are not derived from a	ne made iny crimin NAME O	to this form. I further on the following the	confirm that the funds in d for any criminal use.	relation to these transactions or account NRIC NO.:	
I/We have furnished the obove info writing if there ore any changes to relationship are not derived from a AUTHORISING OFFICER	NAME O	To this form. I further of all activities or intended of DIRECTOR UNDER OF DIRECTOR AND	confirm that the funds in d for any criminal use. YG LING SEON COMPANY STAMP	NRIC NO.: DATE:	
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I/We have furnished the above info writing if there are any changes to relationship are not derived from a AUTHORISING OFFICER DOCUMENT CHECKLIST FOR OPEN Account opening form co	NAME O SIGNATU	JRE OF DIRECTOR AND COMPANY ACCOUNT and signed by Authoris	confirm that the funds in d for any criminal use. YG LING SEOW COMPANY STAMP	NRIC NO.: DATE: 15/9/17	
I/We have furnished the above info writing if there are any changes to relationship are not derived from a AUTHORISING OFFICER DOCUMENT CHECKLIST FOR OPEN Account opening form co Photocopy of Identity Ca Trading Persons	NAME O SIGNATU	JRE OF DIRECTOR AND COMPANY ACCOUNT and signed by Authoris	confirm that the funds in d for any criminal use. YG LING SEOW COMPANY STAMP zing Director ng Pass for non-Singapor	NRIC NO.: DATE: 15/9/17	
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