

* Same director as WOOLZ Global

Customer Information (Company)
For Internal Use only



大東外匯機構
Great East Forex

Company's Particulars			
Registered Name: Arges Global Pte Ltd			
Registered Address: 81 Ubi Avenue Y #10-10 UB. ONE S (Koff 30)			
Tel No.: 6816 1490	Fax No.: -	Business No.: 201602084D	
Authorized Contact Persons:	Contact No.:	Job Title.:	Nationality:
1. Silvana Watson	-	Group Finance mgr	Indonesian
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:
	Date:

Customer Particulars Form
KYC for Corporate & Trading Authorisation



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COMPANY'S PARTICULARS		
REGISTERED NAME: <u>ARGES GLOBAL PTE LTD</u>		
REGISTERED ADDRESS: <u>17 PHILLIP STREET</u> <u>#05-01 GRAND BUILDING . SINGAPORE 048695</u>		
BUSINESS ADDRESS: <u>81 UBI AVENUE 4</u> <u>#10-10 UB. ONE . SINGAPORE 408830</u>		<input type="checkbox"/> SAME AS REGISTERED ADDRESS
TEL NO.: <u>6816-1490</u>	FAX NO.:	EMAIL ADDRESS: <u>financesg@argesglobal.com</u>
PLACE OF REGISTRATION: <u>SINGAPORE</u>	DATE OF REGISTRATION: <u>26 JANUARY 2016</u>	REGISTRATION NO.: <u>201602084D</u>
TYPE OF ENTITY: <input checked="" type="checkbox"/> COMPANY <input type="checkbox"/> SOLE PROPRIETORSHIP <input 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>BUSINESS MANAGEMENT & CONSULTANCY</u>		
SOURCE OF FUNDS <input type="checkbox"/> BANK CREDIT LINE <input type="checkbox"/> DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS <input checked="" type="checkbox"/> OTHERS (Please Specify): <u>BUSINESS INCOME</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:		

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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 of company to trade with Great East Forex

1) AUTHORISED TRADING PERSONNEL	
FULL NAME: SILVANA WATOENG	IC/PASSPORT NO.: 876779568 NATIONALITY: INDONESIAN
JOB TITLE: GROUP FINANCE MANAGER	SPECIMEN SIGNATURE:
2) AUTHORISED TRADING PERSONNEL	
FULL NAME:	IC/PASSPORT NO.:
	NATIONALITY:
JOB TITLE:	SPECIMEN SIGNATURE:

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 VIVEK SUDARSHAN KHABYA	NRIC NO.: 876562132
	SIGNATURE OF DIRECTOR AND COMPANY SEAL 	DATE: 21 MARCH 2017

DOCUMENT CHECKLIST	
<input type="checkbox"/>	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:
	DATE: 01/04/17