



| Company's Particulars | | | |
|--|-----------------------------|------------------------------------|-----------------|
| Registered Name: <i>Paves Asia Pacific Pte Ltd</i> | | | |
| Registered Address: <i>21 Bukit Batok Crescent #16-03, WCEGA Tower, S C 658065</i> | | | |
| Tel No.: <i>65708091</i> | Fax No.: <i>65708092</i> | Business No.: <i>200502814R</i> | |
| Authorized Contact Persons: | Contact No.: | Job Title.: | Nationality: |
| 1. <i>Eapen John</i> ✓ | — | <i>CEO</i> | <i>S'porean</i> |
| 2. <i>Usha Rachel Eapen</i> ✓ | — | <i>ALCS mpr</i> | " |
| 3) | | | |

| Document Checklist for Opening New Company Account | |
|--|--------------------|
| <input type="checkbox"/> Updated list of <u>Authorised Contact/Trading Persons</u> | Date Last Updated: |
| <input checked="" type="checkbox"/> Account Opening Form completed and signed by <u>Authorizing Director</u> or Manager (subject to approval) | |
| <input checked="" type="checkbox"/> Photocopy of identity card (or passport for non-Singaporean) with photograph of ALL the Authorised Trading Persons | |
| <input checked="" type="checkbox"/> Photocopy of identity card (or passport for non-Singaporean) with photograph of <u>Director(s)</u> | |
| <input checked="" type="checkbox"/> Company business profile from ACRA of not later than 6 months | |

| For GEF use only: | |
|-------------------|--------------------------------|
| Remarks: | Verified by: <i>BowLeng</i> |
| | Date: <i>5/8/16</i> |
| | |

Customer Particulars Form
KYC for Corporate & Trading Authorisation

BPA C



大東外匯機構
Great East Forex

| | | |
|---|---|---|
| COMPANY'S PARTICULARS | | |
| REGISTERED NAME: <u>PAVES ASIA PACIFIC PTE LTD</u> | | |
| REGISTERED ADDRESS: <u>21 BUKIT BATOK CRESCENT</u> <u>#16-83, WCEGA TOWER, SINGAPORE 658065</u> | | |
| BUSINESS ADDRESS: <input checked="" type="checkbox"/> SAME AS REGISTERED ADDRESS | | |
| TEL NO.: <u>65708091</u> | FAX NO.: <u>65708092</u> | EMAIL ADDRESS: <u>rachel@paves.com.sg</u> |
| PLACE OF REGISTRATION: <u>SINGAPORE</u> | DATE OF REGISTRATION: <u>07.03.2005</u> | REGISTRATION NO.: <u>200502914R</u> |
| TYPE OF ENTITY: | | |
| <input 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 checked="" type="checkbox"/> OTHERS (Please Specify): <u>PRIVATE LIMITED</u> | | |
| 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. | | |
| SOURCE OF FUNDS | | |
| <input type="checkbox"/> BANK CREDIT LINE <input checked="" type="checkbox"/> DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS <input type="checkbox"/> OTHERS (Please Specify): _____ | | |
| 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) <u>N.A.</u> | | |
| ADDRESS: <u>N.A.</u> | | |

Customer Particulars Form KYC for Corporate & Trading Authorisation



大東外匯機構
Great East Forex

| | | |
|---|---------------------------------------|--|
| 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: EAPEN JOHN | IC/PASSPORT NO.: S2182243D | NATIONALITY: SINGAPOREAN |
| JOB TITLE: CEO | SPECIMEN SIGNATURE: | |
| 2) AUTHORISED TRADING PERSONNEL | | |
| FULL NAME: USHA RACHEL EAPEN | IC/PASSPORT NO.: S1457513H | NATIONALITY: SINGAPOREAN |
| JOB TITLE: ACCOUNTS MANAGER | 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 | NRIC NO.: |
| | SIGNATURE OF DIRECTOR AND COMPANY STAMP | DATE: 02.08.2016 |

| DOCUMENT CHECKLIST | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Form completed and signed by Authorizing Director |
| <input checked="" 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 checked="" 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: 15/10/16 |