## Customer Particulars Form KYC for Corporate & Trading Authorisation



COMPANY'S PARTICULARS				
Registered Name: China Mercha	unts Znergy Tradino	(Singapore) Pte Ltd.		
Registered Address:				
78 Sherton Way #04-02, S	079/20			
Business Address:		Same as Registered Address		
78 shouton Way #04-03	2,5079/20			
Tel No.: 6293 3557 Fa	6293 8285	account @ Cmmw. Com. Sg		
	ate of Registration:	Registration No.		
Singapore		2016148736		
Type of Entity:				
Company	☐ Sole Proprietorship [	☐ Partnership		
<ul> <li>Limited Liability Partnership</li> </ul>	☐ Express Trust			
Others (Please Specify):				
Purpose and intended Nature of Account I	Relationship and/or Relevant Busine	ss Transaction Undertaken		
		hip and/or relevant business transaction undertaken.		
Please also state whether the transaction is		ttance purposes.		
Money Changing	<b>,</b>			
SOURCE OF FUNDS				
	☐ Directors' / Shareholders' / Sol	e Proprietor's Investments		
☐ Others (Please Specify):				
POLITICALLY EXPOSED INDIVIDUALS:				
<ol> <li>Is the beneficial owner or has the in a foreign country, or in an Inter</li> </ol>		d with prominent public functions, whether in Singapore,		
☐ Yes Z	No 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 a	nyone who is or has been entrusted w	vith prominent public functions, whether in Singapore, in		
a foreign country, or in an interna ☐ Yes □	ational organisation?			
<ol><li>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</li></ol>				
organisation? □ Yes (	No No			
□ 1es	NO			
Are you an agent acting on behalf of the c	ustnmar? If was inlance complete the	following		
Name of Entity/Individual: (Please Circle)	astometry yes, piease complete the	jonomuly.		
Address:				
Place of Registration/Nationality:	Registration No. /Identification N	o.: Date of Registration/ Date of Birth:		
Relationship between Agent and Client:	Basis of Authority (E.g Letter of a	uthorisation or board resolution, please attach):		

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Email:  Contact No.:    Account @ Commw. Com. Sg.   G. 293 3557	SUB-BURDON I	IC/Dacemort No.	Nationality
Main Contact Person for GEF acconquiries   Main Contact Person for	Full Name: Lin Ding Tu	IC/Passport No.: S 8078319A	Nationality: Singuporean
Main Contact Person for GEF according	mail: Oecount Ocmmw. Com. S.º	Contact No.: 6293 3557	Job Title: Accts Deadive
UII Name:    IC/Passport No.:   Nationality:	Specimen Signature:		☐ Main Contact Person for GEF account enquiries
imail:   Contact No.:   Job Title:   Main Contact Person for GEF acco enquiries   Main Contact Person for GEF acco enquiries   Ic/Passport No.:   Nationality:   Ic/Passport No.:   Job Title:   IcecLARATION:   Main Contact Person for GEF acco enquiries   IcecLARATION:   Main Contact Person for GEF acco enquiries     IcecLARATION:   Main Contact Person for GEF acco enquiries     IcecLARATION:   Main Contact Person for GEF acco enquiries     IcecLARATION:   Main Contact Person for GEF accounting if there are any changes to be made to this form. I further confirm that the funds in relation to these transactions or account electronship are not devided from any criminal activities, tax evasion or intended for any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal activities, tax evasion or intended for any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal activities, tax evasion or intended for any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal activities, tax evasion or intended for any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal activities, tax evasion or intended for any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal activities, tax evasion or intended for any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal use.     IcecLARATION:   Main Contact Person for GEF account electronship are not devided from any criminal use.	AUTHORISED TRADING PERSONNEL		
Main Contact Person for GEF acco enquiries   IC/Passport No.:   Nationality:	Full Name:	IC/Passport No.:	
and AUTHORISED TRADING PERSONNEL    Contact No.:   Nationality:	Email:	Contact No.:	Job Title:
Full Name:    IC/Passport No.:   Nationality:	Specimen Signature:		☐ Main Contact Person for GEF account enquiries
Email:  Contact No.:  Job Title:  Specimen Signature:  Main Contact Person for GEF accoenquiries  DECLARATION:  Whe hove furnished the above information to the best of my knowledge, information and belief, and will duly inform Great East Forex virting if there are any changes to be made to this form. I further confirm that the funds in relation to these transactions or account elationship are not derived from any criminal activities, tax evasion or intended for any criminal use.  WITHORISING OFFICER  Jame of Director:  What Ferry  Main Contact No.:  Nationality  China  Main Contact Person for GEF accentact No.:  Main Contact Person for GEF accentact No.:  Main Contact Person for GEF accentact No.:  Solution No.:  Main Contact Person for GEF accentact No.:  Solution No.:  Solu	3) AUTHORISED TRADING PERSONNEL		
Specimen Signature:    Main Contact Person for GEF accoenquiries    Main Contact Person for GEF accoenquiries   Main Contact Person for GEF accoenters   Main Contact Person for GEF accoenters   Main Contact Person for GEF accoenters   Main Contact Person for GEF accoenquiries    Main Contact Person for GEF accoenters   Main Contact Person for GEF accoenquiries   Main	Full Name:	IC/Passport No.:	Nationality:
DECLARATION:  //We have furnished the above information to the best of my knowledge, information and belief, and will duly inform Great East Forex 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, tax evasion or intended for any criminal use.  NAUTHORISING OFFICER  Vame of Director:  What Ferry  China  Main Contact Person for GEF accenquiries  Signature of Director and Company Stamp:  Date:  5/4/2018  DOCUMENT CHECKLIST  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of all the Authorise Trading Persons  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of Director(s)  Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	Email:	Contact No.:	Job Title:
Whe have furnished the above information to the best of my knowledge, information and belief, and will duly inform Great East Forex 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, tax evasion or intended for any criminal use.  NATHORISING OFFICER  Name of Director:    Change   C	Specimen Signature:		☐ Main Contact Person for GEF account enquiries
Email:  With Long Common Common Stamp:  Date:  S / 4 / 20   8  DOCUMENT CHECKLIST  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of all the Authorise Trading Persons  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of Director(s)  Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	Name of Director:	TO THE SAME AND A SAME	
with reference CMMW Comeg 6293 3557  enquiries  Date:  5 / 4 / 20 18  DOCUMENT CHECKLIST  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 Authorise Trading Persons  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of Director(s)  Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	My Hun Form	6328P212MA	
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 Authorise Trading Persons  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of Director(s)  Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	Wn Hna Feng	6328771 fW	China
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 Authorise Trading Persons  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of Director(s)  Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	mail	G328771+W	Ch { p.a.
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Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of all the <u>Authorise Trading Persons</u> Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of <u>Director(s)</u> Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	withhafing @ CMMW. com.	6328771 FWN Contact No. 6293 3557	☐ Main Contact Person for GEF account enquiries
Trading Persons  Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of <u>Director(s)</u> Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	imail:  Wuhnafeng to CMMW Combignature of Director and Company Stamp:	6328771 FWN Contact No. 6293 3557	☐ Main Contact Person for GEF account enquiries  Date:
Company business profile from ACRA of not later than 6 months  FOR GEF USE ONLY:	Withhafeng to CMMV COM- signature of Director and Company Stamp:  DOCUMENT CHECKLIST	6318771 + WN Contact No. 6293 3557	☐ Main Contact Person for GEF account enquiries  Date:
FOR GEF USE ONLY:	DOCUMENT CHECKLIST  Form completed and signed by Author  Photocopy of Identity Card (or Passpoi	9 6293 3557  izing Director	Chipa  ☐ Main Contact Person for GEF account enquiries  Date:  5/4/2018.
	ignature of Director and Company Stamp:  DOCUMENT CHECKLIST  Form completed and signed by Author  Photocopy of Identity Card (or Passpor	Contact No. 6293 3557  izing Director rt AND valid Working Pass for non-Singaporean	Chipa  ☐ Main Contact Person for GEF account enquiries  Date:  5 / 4 / 20   8 .
	DOCUMENT CHECKLIST  Form completed and signed by Author  Photocopy of Identity Card (or Passpor	izing Director  rt AND valid Working Pass for non-Singaporean	Chipa  ☐ Main Contact Person for GEF account enquiries  Date:  5 / 4 / 20   8 .
remarks.	DOCUMENT CHECKLIST  Form completed and signed by Author  Photocopy of Identity Card (or Passpor  Trading Persons  Photocopy of Identity Card (or Passpor  Company business profile from ACRA or	izing Director  rt AND valid Working Pass for non-Singaporean	Chipa  ☐ Main Contact Person for GEF account enquiries  Date:  5 / 4 / 20   8 .
Date	DOCUMENT CHECKLIST  Form completed and signed by Author  Photocopy of Identity Card (or Passpor  Trading Persons  Photocopy of Identity Card (or Passpor  Company business profile from ACRA of	izing Director  rt AND valid Working Pass for non-Singaporean	Ohipa    Main Contact Person for GEF account enquiries   Date:   5   4   20   8   .     With photograph of all the Authorised