

**Customer Particulars Form**  
**KYC for Corporate & Trading Authorisation**



大東外匯機構  
Great East Forex

COMPANY'S PARTICULARS		
REGISTERED NAME: <u>TRUST MARITIME SERVICES PTE LTD</u> (under LC maritime service)		
REGISTERED ADDRESS: <u>8, Jurong Town Hall Road</u> <u>THE JTC Summit, SINGAPORE 609434</u>		
BUSINESS ADDRESS: <input checked="" type="checkbox"/> SAME AS REGISTERED ADDRESS		
TEL NO.: <u>98185347</u>	FAX NO.: <u>64911278</u>	EMAIL ADDRESS: <u>lucas.chong@trust-maritime.com</u>
PLACE OF REGISTRATION: <u>SINGAPORE</u>	DATE OF REGISTRATION: <u>10th July 2009</u>	REGISTRATION NO.: <u>200912569 H</u>
TYPE OF ENTITY: <input type="checkbox"/> COMPANY <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> LIMITED LIABILITY PARTNERSHIP <input type="checkbox"/> EXPRESS TRUST <input type="checkbox"/> OTHER LEGAL ARRANGEMENT (Please Specify): _____ <input type="checkbox"/> OTHERS (Please Specify): _____		
<b>Purpose and Intended Nature of Account Relationship and/or Relevant Business Transaction Undertaken</b> 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>1) Ship Management Business</u> <u>2) Ship Consultancy</u> <u>3) Act as Shipowners Manager &amp; Agent</u>		
<b>SOURCE OF FUNDS</b> <input type="checkbox"/> BANK CREDIT LINE <input type="checkbox"/> DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS <input checked="" type="checkbox"/> OTHERS (Please Specify): _____		
<b>POLITICALLY EXPOSED INDIVIDUALS:</b> 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		
<b>Are you an agent acting on behalf of the customer? If yes, please complete the following:</b>		
NAME OF ENTITY/INDIVIDUAL: (Please Circle) <u>TRUST MARITIME SERVICES PTE LTD</u>		
ADDRESS: <u>- same -</u>		

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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

<b>1) AUTHORISED TRADING PERSONNEL</b>		
FULL NAME:	IC/PASSPORT NO.:	
MARYLIN DESPI	G 6121915 W	
	NATIONALITY:	
	FILIPINO	
JOB TITLE:	SPECIMEN SIGNATURE:	
FINANCE MANAGER		
<b>2) AUTHORISED TRADING PERSONNEL</b>		
FULL NAME:	IC/PASSPORT NO.:	
CHONG MING KWAI	S 2584501 C	
	NATIONALITY:	
	SINGAPOREAN	
JOB TITLE:	SPECIMEN SIGNATURE:	
DIRECTOR		

### 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.:
	CHONG MING KWAI	S 2584501 C
	SIGNATURE OF DIRECTOR AND COMPANY STAMP	DATE:
		24/10/2016

<b>DOCUMENT CHECKLIST</b>	
<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

<b>FOR GEF USE ONLY:</b>	
REMARKS:	VERIFIED BY:
	DATE: