

**Customer Information (Company)**  
For Internal Use only

581e



大東外匯機構  
Great East Forex

Same director as  
Austen Maritime

Company's Particulars			
Registered Name: <u>Stena Marine Singapore Pte. Ltd</u>			
Registered Address: <u>78 Shenton Way #12-01 S C 079120</u>			
Tel No.: <u>6323 2066</u>	Fax No.: <u>6323 2766</u>	Business No.: <u>201308848N</u>	
Authorized Contact Persons:	Contact No.:	Job Title:	Nationality:
1. <u>Cher Chuan Teck</u> ✓	-	<u>Director of Finance &amp; Operations</u>	<u>Singapore</u>
2. <u>Michael Cheong Kok Wei</u> ✓	-	<u>Group. PC</u>	"
3) <u>Liam Pey Jen</u> ✓	-	<u>Senior Accountant</u>	"
4) <u>Chong Li Ling</u>	-	<u>Accountant</u>	"

**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"/> <b>Account Opening Form completed and signed by <u>Authorizing Director</u> or Manager (subject to approval)</b>	
<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: <u>Sow Lay</u>
	Date: <u>7/6/17</u>

# Customer Particulars Form

## KYC for Corporate & Trading Authorisation



大東外匯機構  
Great East Forex

<b>COMPANY'S PARTICULARS</b>		
REGISTERED NAME: STENA MARINE SINGAPORE PTE. LTD.		
REGISTERED ADDRESS: 78 SHENTON WAY #12-01 SINGAPORE 079120		
BUSINESS ADDRESS: <input checked="" type="checkbox"/> SAME AS REGISTERED ADDRESS		
TEL NO.: 6323 2066	FAX NO.: 6323 2766	EMAIL ADDRESS:
PLACE OF REGISTRATION: SINGAPORE	DATE OF REGISTRATION: 22/02/2013	REGISTRATION NO.: 201304848N
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): _____		
<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. For money changing		
<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): Cheque		
<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) ADDRESS:		

# 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

<b>1) AUTHORISED TRADING PERSONNEL</b>		
FULL NAME: Cher Choon Teck ✓	IC/PASSPORT NO.: S1658296D ✓	NATIONALITY: Singaporean
JOB TITLE: Director of Finance & Operations	SPECIMEN SIGNATURE:	
<b>2) AUTHORISED TRADING PERSONNEL</b>		
FULL NAME: Michael Cheong Kok Wei ✓	IC/PASSPORT NO.: S1818542C ✓	NATIONALITY: Singaporean
JOB TITLE: Group Financial Controller	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 Cher Choon Teck	NRIC NO.: S1658296D
	SIGNATURE OF DIRECTOR AND COMPANY STAMP 	DATE: 23/5/17

DOCUMENT CHECKLIST FOR OPENING NEW COMPANY ACCOUNT	
<input checked="" type="checkbox"/>	Account opening 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 checked="" type="checkbox"/>	Company business profile from ACRA of not later than 6 months

FOR GEF USE ONLY:	
REMARKS:	VERIFIED BY:
	DATE:

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## Appointment of staff acting on behalf of company to trade with Great East Forex

<b>1) AUTHORISED TRADING PERSONNEL</b>		
FULL NAME: Lim Pey Jen	IC/PASSPORT NO.: S8079678A	NATIONALITY: Singaporean
JOB TITLE: Senior Accountant	SPECIMEN SIGNATURE:	
<b>2) AUTHORISED TRADING PERSONNEL</b>		
FULL NAME: Chong Li Ling	IC/PASSPORT NO.: S8156226A	NATIONALITY: Permanent Resident
JOB TITLE: Accountant	SPECIMEN SIGNATURE:	

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FOR GEF USE ONLY:	
REMARKS:	VERIFIED BY:
	DATE: 24/6/17