

Customer Particulars Form KYC for Corporate & Trading Authorisation



大東外匯機構
Great East Forex

COMPANY'S PARTICULARS

Registered Name:

DFS VENTURE SINGAPORE (PTE) LIMITED

Registered Address:

50 RAFFLES PLACE
SINGAPORE LAND TOWER
SINGAPORE 048623

Business Address: 750 CHAI CHEE ROAD #02-01/08
VIVA BUSINESS PARK
SINGAPORE 469000

☐ Same as Registered Address

Tel No.:

65-6419 2698

Fax No.:

65-6734 2281

Email:

Lily.fung@dfs.com

Place of Registration:

SINGAPORE

Date of Registration:

10 MAY 1973

Registration No.:

197300867M

Type of Entity:



Company

☐ Sole Proprietorship

☐ Partnership



Limited Liability Partnership

☐ Express Trust



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.

Foreign currency exchange services

SOURCE OF FUNDS

☒ Bank Credit Line

☐ Directors' / Shareholders' / Sole Proprietor's Investments

☐ Others (Please Specify): sales proceeds

POLITICALLY EXPOSED INDIVIDUALS:

- 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?
☐ Yes ☒ No
- 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?
☐ Yes ☒ No
- 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?
☐ Yes ☒ No

Are you an agent acting on behalf of the customer? If yes, please complete the following:

Name of Entity/Individual: (Please Circle)

Address:

Place of Registration/Nationality:

Registration No. /Identification No.:

Date of Registration/ Date of Birth:

Relationship between Agent and Client:

Basis of Authority (E.g Letter of authorisation or board resolution, please attach):

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

1) AUTHORISED TRADING PERSONNEL		
Full Name: <i>FUNG SROK YEE</i>	IC/Passport No.: <i>S7216858E</i>	Nationality: <i>SINGAPOREAN</i>
Email: <i>Lily.Fung@dfs.com</i>	Contact No.: <i>64192698</i>	Job Title: <i>VP-OPERATIONS & CONTROL, SOUTH EAST ASIA</i>
Specimen Signature: <i>[Signature]</i>		<input type="checkbox"/> Main Contact Person for GEF account enquiries
2) AUTHORISED TRADING PERSONNEL		
Full Name:	IC/Passport No.:	Nationality:
Email:	Contact No.: <i>N.A.</i>	Job Title:
Specimen Signature:		<input type="checkbox"/> Main Contact Person for GEF account enquiries
3) AUTHORISED TRADING PERSONNEL		
Full Name:	IC/Passport No.:	Nationality:
Email:	Contact No.: <i>N.A.</i>	Job Title:
Specimen Signature:		<input type="checkbox"/> Main Contact Person for GEF account enquiries

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, tax evasion or intended for any criminal use.

AUTHORISING OFFICER		
Name of Director: <i>WILCY NONG</i>	IC/Passport No.: <i>HG158432</i>	Nationality: <i>CANADIAN</i>
Email: <i>Wilcy.Wong@dfs.com</i>	Contact No.: <i>65-64192699</i>	<input type="checkbox"/> Main Contact Person for GEF account enquiries
Signature of Director and Company Stamp: <i>[Signature]</i> 		Date: <i>23 APR 2018</i>

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 checked="" type="checkbox"/>	Company business profile from ACRA of not later than 6 months

FOR GEF USE ONLY:	
Remarks:	Verified By:
	Date: