

Customer Particulars Form

KYC for Corporate & Trading Authorisation



大東外匯機構
Great East Forex

COMPANY'S PARTICULARS		
Registered Name: FRONTIER SHIPPING SERVICES PTE LTD		
Registered Address: 10 JALAN KILANG #03-06 SEME DARBY ENTERPRISE CENTRE SINGAPORE 159410		
Business Address: <input checked="" type="checkbox"/> Same as Registered Address		
Tel No.: 67799667	Fax No.: 67736997	Email Address: crew@frontiers.com.sg
Place of Registration: SINGAPORE	Date of Registration: 25-11-2005	Registration No.: 200516215H
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"/> 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.		
CASH TO MASTER FOR CREW WAGES / VOUCHER BILLING / PROVISIONS		
SOURCE OF FUNDS		
<input type="checkbox"/> Bank Credit Line <input type="checkbox"/> Directors' / Shareholders' / Sole Proprietor's Investments <input checked="" type="checkbox"/> Others (Please Specify): REMITTANCE FROM SHIPOWNERS		
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 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 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 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) FRONTIER SHIPPING SERVICES PTE LTD		
Address: 10 JALAN KILANG #03-06 SEME DARBY ENTERPRISE CENTRE SINGAPORE 159410		
Place of Registration/Nationality: SINGAPORE	Registration No. / Identification No.: 200516215H	Date of Registration/ Date of Birth: 22-11-2005
Relationship between Agent and Client: NIL	Basis of Authority (E.g Letter of authorisation or board resolution, please attach): NIL	

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

1) AUTHORISED TRADING PERSONNEL	
Full Name: PEH SIEW CHENG (Journie)	IC/Passport No.: S7017166Z Nationality: SINGAPORE
Job Title: Accountant	Specimen Signature:
2) AUTHORISED TRADING PERSONNEL	
Full Name: TEE WAH PING (Aibert)	IC/Passport No.: S1230715B Nationality: SINGAPORE
Job Title: Operation Manager	Specimen Signature:
3) AUTHORISED TRADING PERSONNEL	
Full Name: TANG WAI CHUN (Jasmine)	IC/Passport No.: S1654486H Nationality: SINGAPORE
Job Title: Accountant	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, tax evasion or intended for any criminal use.

AUTHORISING OFFICER	Name of Director: KEE SENG	IC/Passport No.: F053063914
	Signature of Director and Company Stamp: 	Date: 28-11-2017

DOCUMENT CHECKLIST	
<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

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