

Account Opening Purpose:	(at most 3 items can be selected.) <input type="checkbox"/> Saving/Fixed Deposit <input type="checkbox"/> Payroll <input type="checkbox"/> Investment <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Daily transaction <input type="checkbox"/> Business transaction <input type="checkbox"/> Remittance. <input type="checkbox"/> Commission <input type="checkbox"/> Dividend payment <input type="checkbox"/> Others (Please Specify): _____
Reason for opening account in Malaysia (Applicable for Non-Resident only)	(at most 3 items can be selected.) <input type="checkbox"/> Immigration <input type="checkbox"/> Work <input type="checkbox"/> Study <input type="checkbox"/> Investment in Malaysia <input type="checkbox"/> Business <input type="checkbox"/> MM2H Program <input type="checkbox"/> Others (Please Specify): _____
Anticipated Account Activity: (MYR) (Monthly Average)	<u>Accumulative Debit & Credit :</u> <input type="checkbox"/> < 5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-20,000 <input type="checkbox"/> 20,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> 100,001-200,000 <input type="checkbox"/> 200,001-1,000,000 <input type="checkbox"/> 1,000,001 or above
	<u>Number of Transaction:</u> <input type="checkbox"/> < 25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-100 <input type="checkbox"/> 101-200 <input type="checkbox"/> 201 or more
	<u>Overall Transaction Pattern:</u> <input type="checkbox"/> Transfer <input type="checkbox"/> Remittance <input type="checkbox"/> Others (Please Specify): _____
	<u>Main channel(s) of Transaction:</u> <input type="checkbox"/> Internet Banking <input type="checkbox"/> Phone Banking <input type="checkbox"/> Others (Please Specify): _____
Relationship with specified persons of the Bank:	The customer is / is not a director, an employee responsible for approving loan application, a controller or a minority shareholder controller of an entity related to our group of companies (each, a specified person) or has any specified person or relative of any specified person agreed to act as guarantor for any matter. <input type="checkbox"/> No <input type="checkbox"/> Yes Please provide 1) Name of specified person: 2) Relationship:

Attended by:

Approved by:

Signature:
Name:
Position:
Date:

Signature:
Name:
Position:
Date:

***Approvals to be sought in accordance with the AML/CFT policy and Compliance Manual/Policy**

***Please document the above required information as per AML/CFT policy and Compliance Manual/Policy**