

Business Account

Account Maintenance & Update Form

Please complete the form in BLOCK LETTERS & submit the completed form to any of our OCBC Branch.

NOTES:

All references to "OCBC" shall mean OCBC Al-Amin Bank Berhad, as the case may be.

All references to "I/We" shall mean the Company whose Registered Name first appears on the top of this Form.

Part 1: BUSINESS PARTICULAR							
Registered Name			Registration No.				
Malaysia Tax Identification Number [TIN] :		<u> </u>	Malaysia Sales and Service Tax	[SST] Registration Number :			
(Malaysia TIN prefix can be either C, CS, D, F, FA, PT		TIN begins with					
a "0" after the prefix, please remove the "0". If y that you add a "0" at the end. For e.g. if the TIN is							
Accounts to be updated (Please tick only one box as	s applicable)						
☐ All OCBC accounts☐ Only the following OCBC accounts							
1.		4.					
2.		5.					
3. Part 2: CHANGE IN CONTACT PERSON	Authorized to communicate customer	6.					
		[
Add Remove	Update	☐ Add	☐ Remove ☐	Update			
Name (as in NRIC)		Name (as in NRI	C)				
NRIC / Passport		NRIC / Passpo	ort				
Mobile No. <i>e.g.</i> +601234567890		Mobile No.					
Email (required)			Email (required)				
Telephone No. <i>e.g.</i> +601234567890		Telephone N	o. <i>e.g.</i> +601234567890				
☐ Add ☐ Remove ☐	Update	☐ Add	☐ Remove ☐	Update			
Name (as in NRIC)		Name (as in NRI	C)				
NRIC / Passport		NRIC / Passpo	ort				
Mobile No. <i>e.g.+601234567890</i>		Mobile No.	e.g.+601234567890				
Email (required)		Email (required					
Telephone No. <i>e.g.</i> +601234567890		Telephone N	o. e.g.+601234567890				
Part 3: CHANGE IN FAX NUMBER/ADDR							
Add Fax Number	Mailing Address (DO NOT use P.O. Box)		Business Operating Address (if differs from Mailing Address)				
Remove Fax Number							
Note: To amend your trade fax numbe	Postal Code		City				
please complete the Trade Servic Authorisation Form which is ma	State		Country				
available on our website.							
Part 4: CHANGE IN AUTHORISED SIGNA	TORIES/SIGNATURE/SIGN	IING MANDAT	E				
Signing Conditions (Please tick only one box as applied			6				
☐ Grouping and signing limit as follows: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐							

Action	Authorised Sign	Signing Limit (if any)	Group (if any)	Specimen Signature (Sign within the box)	
☐ Add ☐ Remove ☐ Update	Full Name				
	NRIC				
☐ Add ☐ Remove ☐ Update	Full Name NRIC				
	Designation				
☐ Add ☐ Remove ☐ Update	Full Name				
	Designation				
Part 5: OTHER F	REQUEST/MAINTENANCE				
1. Reprint Hardco	py Documents	2. [Documents Mailing Mod	de (Only applicable for n	nonthly CA/-i, TD/TD-i or FD/-i statements)
Document	:Type Month/Year		☐ eStatement		
☐ Account St	tatement		Normal Mail		
☐ Audit Conf	firmation				
Note: Fees & charg	ges may apply				
3. Information on	·				
Signatory(ies) and Company/Firm/Bu interest to the Cor	d Authorised User(s) appointed usiness's affairs or accounts) to 0	d from time to time, DCBC Group* for marke	to disclose their conta ting of products and se	act details (excludi rvices distributed by	the Authorised Person(s), Authorised ing the information relating to the y the OCBC Group*, which may be of C Group means OCBC Bank (Malaysia)
☐ The Company/F	Firm/Business does not consent t	o disclose its contact de	tails for marketing of an	y product or service	
Part 6: DECLAR	ATION : DIRECTOR/SHARE	OLDING IN THE COM	ЛРА N Y		
1 is there any cha	ange in Director in the company	2 151	here any change in Sha	reholding in the cor	mnany?
_	relevant document (e.g. Form 49) & pro	_	· -	-	m 32A/Annual Return) & proceed to Part 7)
Part 7: DECLAR	ATION: BENEFICIAL OWNE	R(S)			
I/We certify and co	onfirm that the following individ	ual(s) ultimately own(s)	or has/have effective co	ntrol over the Accou	unt ("Beneficial Owners"):
□ Add □ Up	odate Details Remove	For removal, please comp	lete Name & NRIC/Passport		
Name (as in NRIC)		Occupation/Public P	osition Held	Residential Addre	iss
NRIC/Passport N	No.	Contact Number Office e.g.+60			
Nationality		Mobile e.g.+60	1234567890	Postcode Residency Status	□Resident □Non-resident

☐ Add ☐ Update Details ☐ Remove Name (as in NRIC)	No. only	For removal, please complete Name & NRIC/Passport No. only Occupation/Public Position Held		Residential Address		
NRIC/Passport No.	Contact Nu	ımber				
	Office					
lationality	Mobile		Postcode Residency Sta	atus □Resident □Non-resident		
lease furnish certified true copies of their ide	entity documents	If the list is more than snac				
·	·		es provided, piease at	ttaen separate nsting.		
t 8: DECLARATION : BENEFICIARY OF						
trustee(s), I/we am/are obliged to disclose to nt Accounts) Regulations 2012 that I/we hold ntity card number(s) or passport number(s) or Add Update Details Remove	l as trustee(s) all or or any other ident	deposits in the trust account ification acceptable to the E	t, the trust account nu Bank, and the followin	umber, my/our name(s), address(s) and ag information:		
Name / Identifier Code		ss / Identifier Code		NRIC / Passport/ Business Reg No.		
Enter Here		Enter Here		Enter Here		
				% of interest of the amount For e.g. RM50 of the account balance of RM200 belongs to this beneficiary therefore the % of interest is 25% 25%		
Residency Status ☐ Resident ☐ Non-resident	dent ► For non-resi	dent, please state the country of r	esidence	Date of Birth / Incorporation		
Country of Residence Enter H	ere			dd/mm/yyyy		
Institutional Sector ☐ Individual ☐ Non-in	ıdividual ▶ For non	-individual_nlease select one insti	tutional sector helow			
	ing Institution	☐ Central Bank	☐ Government	☐ Financial Corporation		
3	rance Company	☐ Nominees/ Custodian	☐ Pension Funds	☐ Not classified as any of the above		
☐ Add ☐ Update Details ☐ Remove	N 5		ant / Duning and Day Alay and			
Name / Identifier Code		ss / Identifier Code		NRIC / Passport/ Business Reg No.		
Enter Here	Enter	Here		Key the second of the amount of the amount of the account balance of RM200 belongs to this beneficiary therefore the % of interest is 25%		
Residency Status ☐ Resident ☐ Non-resident	dent ► For non-resi	dent, please state the country of r	esidence	Date of Birth / Incorporation		
Country of Residence Enter H	ere			dd/mm/yyyy		

* If the list is more than spaces provided, please attach separate listing.

Institutional Sector ☐ Individual ☐ Non-individual ▶ For non-individual, please select one institutional sector below

☐ Banking Institution

☐ Insurance Company

Part 9: CUSTOMER DECLARATION & CONSENT

☐ Asset Management

☐ Non-Financial Corporation

1. I/We have voluntarily provided my/our personal data to OCBC and consent to OCBC processing my/our personal data for the purpose of this maintenance. If I/we do not provide any data required in this maintenance, OCBC may not be able to proceed further on my/our request for this maintenance. I/We have read OCBC's Privacy Policy and confirm that I/we have been notified of the following matters via the Privacy Policy (i) OCBC may collect my/our personal data directly from me/us or from third party sources; (ii) purpose for which my/our personal data is collected; (iii) my/our right to access my/our personal data and correct it; (iv) the class of third parties to whom OCBC may disclose my/our personal data; (v) the choices and means for limiting the processing of my/our personal data; (vi) whether the personal data requested is obligatory or voluntary, and if obligatory, the consequences for not providing such data; (vii) to update my/our personal data as soon as there are changes; and (viii) OCBC's contact details if I/we wish to make inquiries or give feedback.

☐ Central Bank

☐ Nominees/ Custodian

☐ Government

☐ Pension Funds

☐ Financial Corporation

☐ Not classified as any of the above

- 2. I/We irrevocably grant consent to the relevant credit reporting agency(ies) (as defined under the Credit Reporting Agencies Act, 2010) ("CRAs") with whom OCBC conduct credit checks to disclose my/our credit report/information to OCBC for the purpose of this maintenance and for OCBC's risk management and review. OCBC is hereby authorised but is under no obligation to convey my/our consent and the purpose of such disclosure to the relevant credit reporting agency(ies).
- 3. I/We have provided data of other individuals such as my/our director(s), shareholder(s), relevant manager(s), partner(s), office bearer(s), officer(s), Authorised Person(s), Authorised Signatory(ies) and Authorised User(s) for this application, I/we confirm that I/we have obtained consent from them (i) to disclose their personal data to OCBC to be processed for purposes of the products and services with OCBC and in accordance with OCBC's Privacy Policy; (ii) for OCBC's verification of their personal data with credit agencies and have obtained their consent for the relevant CRAs to disclose their credit report/information to OCBC for the purpose of this maintenance and for OCBC's risk management and review; (iii) for OCBC to disclose their personal data to classes of third parties described in OCBC's Privacy Policy. I/We have also informed them to read OCBC's Privacy Policy posted on OCBC's website and available at OCBC's branches on request.
- 4. I/We confirm that the Authorised Person(s), Authorised Signatory(ies), Authorised User(s) have consented to disclose their personal data to OCBC for marketing of products and services distributed by OCBC, which may be of interest to our Company/Firm/Business. I/We have informed them that they may at any time withdraw such consent.

Authorised by:							
Name	Sigr	ature [Auth	norised Person]	Name	nature [Authorised Person]	Name	Signature [Authorised Person]
(as in NRIC) Date				(as in NRIC) Date		(as in NRIC) Date	
Changes in (WFI: Chang	e of Address	/Customer L	Details)	- FOR BAN Changes in Signatories/Signat Beneficial Owner(s) (WFI: Change of Signatory/Mode of the code/corporate status. If the	of Operations)	(w	quest for Audit Confirmation Fl: Audit Confirmation)
SSIC				BNM Sectorial Code		Class & S	Sub-Class Code
MSIC				BNM Counterparty Code		Start-up	Financing Code
Corp Status							
For Branch/BU L	Jse (with s	igning code	e, if applicable)			For Operations Use
Processed By /	Date		 Authori	sed By / Date	Branch / Dept Name		Signature Verified By / Date