



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 Bank (Malaysia) Berhad and/or 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.

Registered Name	Registration No.			
Malaysia Tax Identification Number [TIN]: (Malaysia TIN prefix can be either C, CS, D, F, FA, PT, TA, TC, TN, a "0" after the prefix, please remove the "0". If your TIN does that you add a "0" at the end. For e.g. if the TIN is "C0123456"	Malaysia Sales and Se	ervice Tax [SST] Registration Number :		
Accounts to be updated (Please tick only one box as applicable) All OCBC accounts		<u> </u>		
Only the following OCBC accounts 1. 3.	2. 4.			
5. Part 2: CHANGE IN CONTACT BERSON (Automate)	6.			
Part 2: CHANGE IN CONTACT PERSON (Authorised to do a series of the serie		Add Name (as in NRIC)] Remove □ Update Detail	
NRIC / Passport Mobile No. e.g.+601234567890 Email (required) Telephone No. e.g.+601234567890		Email (required)		
☐ Add ☐ Remove ☐ Update D	Petails	Add [☐ Remove ☐ Update Detail	
Name (as in NRIC)		Name (as in NRIC)		
NRIC / Passport Mobile No. Email (required) Telephone No. e.g.+601234567890		Email (required)		
Part 3: CHANGE IN FAX NUMBER/ADDRESS		тегернопе но.	C.g. 100123-307030	
Add Fax Number Remove Fax Number	Mailing Address (DO NOT use P.O. Box) Address Address Postal Code	(DO NOT use P.O. Box) (if differs from Mailing Address) ddress ddress ostal Code City		
Note: To amend your trade fax number, please complete the Trade Services Authorisation Form which is made available on our website.	State			
Part 4: CHANGE IN AUTHORISED SIGNATORIES/S	IGNATURE/SIGNING MANDA	TE		
Signing Conditions (Please tick only one box as applicable) ☐ No Change	☐ Any from 6	Group A jointly with any	From Group B	
Group signing limit as follows:		following persons	Trom Group B	

Action	Authorised Signatories Details				Signing Limit (if any)	Group (if any)	Specimen Signature (Sign within the box)
☐ Add ☐ Remove ☐ Update	Full Name NRIC Designation						
☐ Add ☐ Remove ☐ Update	Full Name NRIC Designation						
☐ Add ☐ Remove ☐ Update	Full Name NRIC Designation						
Part 5: OTHER I	REQUEST/MAI	NTENANCE					
Document Account St Audit Cont Note: Fees & char	Type Montatement	th/Year		□ eS	nent Mailing Modo statement ormal Mail	e Only applicable for mon	thly CA/-i, TD/TD-i or FD/-i statements
Signatory(ies) and Company/Firm/Bu interest to the Coi Berhad and its relative The Company/Fi	Firm/Business cord Authorised Ususiness's affairs of mpany/Firm/Busined corporations	ser(s) appointed or accounts) to (iness. The Comp s in Malaysia. es not consent t	d from time to t DCBC Group* for n Dany/Firm/Busines o disclose its conta	ime, to dis narketing o s may at an act details fo	sclose their conta f products and ser y time withdraw s or marketing of an	act details (excluding rvices distributed by t	he Authorised Person(s), Authorised g the information relating to the the OCBC Group*, which may be of Group means OCBC Bank (Malaysia)
			IOLDING IN THE				3
1. Is there any cha	ange in Director i relevant document (reholding in the com	pany: 32A/Annual Return) & proceed to Part 7)
Part 7: DECLAR	ATION : BENEI	FICIAL OWNE	R(S)				
I/We certify and c	onfirm that the fo	ollowing individ	ual(s) ultimately ov	vn(s) or has	/have effective co	ntrol over the Accour	nt ("Beneficial Owners"):
□ Add □ Update Details □ Remove Name (as in NRIC) For removal, please No. only Occupation/Pu					nme & NRIC/ Passport n Held	Residential Address	S
NRIC/Passport N	lo.		Contact Number	er g.+6012345			au.
Nationality			Mobile <i>e</i> .	g.+6012345	567890	Postcode State Residency Status	City Country □Resident □Non-resident
☐ Add ☐ Update Details ☐ Remove Name (as in NRIC) For removal, plea No. only Occupation/P				•	n Held	Residential Addres	is
NRIC/Passport N	lo.			er g.+6012345 g.+6012345		Postcode State Residency Status	City Country □ Resident □ Non-resident

* Please furnish certified true copies of their identity documents. If the list is more than spaces provided, please attach separate listing.

☐ Add ☐ Update Details ☐ Remove ► For removal, please complete Name & NRIC/Passport/ Business Reg. No. only

Part 8: DECLARATION: BENEFICIARY OF TRUST/CLIENT ACCOUNT As trustee(s), I/we am/are obliged to disclose to the Bank under Malaysia Deposit Insurance Corporation (Disclosure Requirements for Trust Accounts and Joint Accounts) Regulations 2012 that I/we hold as trustee(s) all deposits in the trust account, the trust account number, my/our name(s), address(s) and identity card number(s) or passport number(s) or any other identification acceptable to the Bank, and the following information: ☐ Add ☐ Update Details ☐ Remove ▶ For removal, please complete Name & NRIC/Passport/ Business Reg. No. only Name / Identifier Code Address / Identifier Code NRIC / Passport/ Business Reg No. % 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% Date of Birth / Incorporation Residency Status ☐ Resident ☐ Non-resident ▶ For non-resident, please state the country of residence **Country of Residence** Institutional Sector ☐ Individual ☐ Non-individual ▶ For non-individual, please select one institutional sector below ☐ Asset Management ☐ Banking Institution ☐ Central Bank ☐ Financial Corporation ☐ Government ☐ Non-Financial Corporation ☐ Insurance Company ☐ Nominees/ Custodian □ Pension Funds ☐ Not classified as any of the above

Name / Identifier Code	Add	ress / identifier Code		NRIC / Passport/ Business Reg No.
				% 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 ► For non-re	esident, please state the country	of residence	Date of Birth / Incorporation
Country of Residence	Enter Here			DD/MM/YYYY
Institutional Sector Individua	al □ Non-individual ► For r	non-individual, please select one i	nstitutional sector below	
☐ Asset Management	\square Banking Institution	☐ Central Bank	\square Government	☐ Financial Corporation

☐ Nominees/ Custodian

☐ Pension Funds

 \square Not classified as any of the above

☐ Insurance Company

Part 9: CUSTOMER DECLARATION & CONSENT

☐ 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.
- 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.

Aut	horised	by:
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	Signature [Authorised Person]		Signature [Authorised Person]		Signature [Authorised Person]
Name (as in NRIC) Date		Name (as in NRIC) Date		Name (as in NRIC) Date	

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

	- FOR BANK USE ONLY -										
Changes in Contact Person/Address (WFI: Change of Address/Customer Details) Changes in Signatories/Signature/Signing condition/Declaration/ Beneficial Owner(s) (WFI: Change of Signatory/Mode of Operations)						; <u> </u>	Request for Audit Confirmation (WFI: Audit Confirmation)				
Please complete this section only if there is a change to any of the code/ corporate status. If there is no change, please leave this section blank.											
SSIC								BNM Sectorial Code	ub-Class Code		
MSIC								BNM Counterparty Code Start-up Fina			Financing Code
Corp Statu	s										
For Branch/BU Use (with signing code, if applicable)								For Operations Use			
Processed By / Date			Aı	uthorised By / Date	Branch / Dept Name		Signature Verified By / Date				