

组织名称(Legal Name): _____

操作名称(Operating Name) : _____

组织形态(Entity Type): (Tick one) Corporation Trust Non-Profit Organization Other: _____

注册号码(Registration No.): _____ 成立日期(Date Started): _____

主营业务(Nature of the Principal Business): _____

办公地址(Business Address): _____

联系电话(Tel No): _____ 传真号码(Fax No): _____

手机号码(Mobile Ph No): _____ 邮箱(E-mail): _____

Note: Please list ALL directors and major shareholders. Please attach another sheet of paper if the following form is insufficient to fill in all details.

股东姓名 Full Name of major Shareholder (holding 25% or more) _____	股份量 No. of Shares: _____ 股份占有百分比 % of total shares: _____	❖ Third Party Declaration. (tick one) <input type="checkbox"/> These shares are held as Nominee for, or on behalf of, _____, details of whom are attached. <input type="checkbox"/> The shareholder is the beneficial owner.	
股东姓名 Full Name of major Shareholder (holding 25% or more) _____	股份量 No. of Shares: _____ 股份占有百分比 % of total shares: _____	❖ Third Party Declaration. (tick one) <input type="checkbox"/> These shares are held as Nominee for, or on behalf of, _____, details of whom are attached. <input type="checkbox"/> The shareholder is the beneficial owner..	
*董事姓名 Full Name of Director _____	签名 Signature: _____ 日期 Date _____	生日 (DOB) _____	电话 (Phone): _____
		护照及证件号码 (1) (Details of IDs) _____	(2) _____
		地址 (Address) _____	
*董事姓名 Full Name of Director _____	签名 Signature _____ 日期 Date _____	生日 (DOB) _____	电话 (Phone): _____
		护照及证件号码 (1) (Details of IDs) _____	(2) _____
		地址 (Address) _____	
授权人姓名 Authorized Person _____	签名 Signature _____ 日期 Date _____	生日 (DOB) _____	电话 (Phone): _____
		护照及证件号码 (1) (Details of IDs) _____	(2) _____
		地址 (Address) _____	
授权人姓名 Authorized Person _____	签名 Signature _____ 日期 Date _____	生日 (DOB) _____	电话 (Phone): _____
		护照及证件号码 (1) (Details of IDs) _____	(2) _____
		地址 (Address) _____	

汇款信息(Beneficiary Account Details)

帐户名称(Account Name): _____ 帐号(Account No.): _____
开户行(Bank): _____ Swift Code: _____
分支机构(Branch): _____ 分行 _____ 支行 _____ 营业部
收款人地址(Beneficiary Address): _____

Please confirm the following information in relation to your business activity:

Are you GST registered? Yes No .

If YES,

What is your GST registration number? (optional): _____

In your last financial year, did you make *taxable supplies** that were **not less than** 75% of your total supplies?.

Yes No .

*Taxable supplies include those supplies that are subject to GST at the standard rate of (15%) or 0%.

Declaration

I hereby confirm that I am duly authorised by the Board of Directors/Governors of: _____ (entity's name) _____ to execute and perform all financial transactions on behalf of the Entity. I certify that the information given by me above is complete, accurate and true. I acknowledge that I have been provided with a copy of FSG and PDS for account opening to trade in foreign exchange contracts with the terms of the Master Agreement for foreign exchange transactions.

*Name (Print): _____ *Signature: _____

*Witness Name (Print): _____ *Signature: _____

Date: _____

Checklist:

- Copy of Company Certification / Entity Registration
- Directors' and major shareholders' ID
- Managers' / Authorised persons' ID
- Written Letters of Authority
- Copy of Memorandum and Articles of Association, if applicable
- Copy of Company Annual Return, if applicable
- Others: _____

Remarks: (For Official Use)