

Client Category Checklist Form - Product: UTF

Account No. -

Incorporation No: _____

Name of Incorporation: _____

Please read the explanatory notes and tick one (1) of the following:

	Corporates				
<p>The client uses its investment gain / income for BUSINESS purposes. This applies to entities such as partnership, private limited (Sdn Bhd), public limited (Bhd), public listed, state-owned enterprises, government-linked corporations (GLC), non-private trust or non-private offshore investment companies.</p> <p>Note: If a partnership or a private limited (Sdn Bhd) that may use its investment gain / income for personal purposes AND aims to hold its investment for >5 years, please categorise it as Wealth Corporates.</p> <p>Please tick <input checked="" type="checkbox"/> one (1) of the following:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> GLC / State-owned Enterprises</td> <td><input type="checkbox"/> Public Listed</td> </tr> <tr> <td><input type="checkbox"/> Sdn Bhd / SME</td> <td><input type="checkbox"/> Others</td> </tr> </table>		<input type="checkbox"/> GLC / State-owned Enterprises	<input type="checkbox"/> Public Listed	<input type="checkbox"/> Sdn Bhd / SME	<input type="checkbox"/> Others
<input type="checkbox"/> GLC / State-owned Enterprises	<input type="checkbox"/> Public Listed				
<input type="checkbox"/> Sdn Bhd / SME	<input type="checkbox"/> Others				

	Wealth Corporates			
<p>The client (or its end client) uses its investment gain/income mainly for PERSONAL purposes.</p> <p>Note: If a partnership or a private limited (Sdn Bhd) that invests only in cash fund AND aims to hold its investment for <5 years, please categorise it as Corporates.</p> <p>Please tick <input checked="" type="checkbox"/> one (1) of the following:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Sole Proprietorship / Partnership</td> </tr> <tr> <td><input type="checkbox"/> Private Investment Companies (onshore / offshore) / Sdn Bhd</td> </tr> <tr> <td><input type="checkbox"/> Private Trust (onshore / offshore) / Private Non-charitable Foundation</td> </tr> </table>		<input type="checkbox"/> Sole Proprietorship / Partnership	<input type="checkbox"/> Private Investment Companies (onshore / offshore) / Sdn Bhd	<input type="checkbox"/> Private Trust (onshore / offshore) / Private Non-charitable Foundation
<input type="checkbox"/> Sole Proprietorship / Partnership				
<input type="checkbox"/> Private Investment Companies (onshore / offshore) / Sdn Bhd				
<input type="checkbox"/> Private Trust (onshore / offshore) / Private Non-charitable Foundation				

	Government Fund / Foundation / Agency			
<p>Please tick <input checked="" type="checkbox"/> one (1) of the following:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Government Foundation</td> </tr> <tr> <td><input type="checkbox"/> Government Fund</td> </tr> <tr> <td><input type="checkbox"/> Government Agency</td> </tr> </table>		<input type="checkbox"/> Government Foundation	<input type="checkbox"/> Government Fund	<input type="checkbox"/> Government Agency
<input type="checkbox"/> Government Foundation				
<input type="checkbox"/> Government Fund				
<input type="checkbox"/> Government Agency				

	Insurance Fund
--	-----------------------

	Retirement / Pension Fund
--	----------------------------------

	Third Party Distribution
--	---------------------------------

	Others						
<p>Please tick <input checked="" type="checkbox"/> one (1) of the following:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Cooperative</td> <td><input type="checkbox"/> Joint Management Bodies</td> </tr> <tr> <td><input type="checkbox"/> Charitable Organisation / Religious</td> <td><input type="checkbox"/> Foundation</td> </tr> <tr> <td><input type="checkbox"/> Association / Society / Agency</td> <td><input type="checkbox"/> Others (please specify)</td> </tr> </table> <p style="text-align: right;">_____</p>		<input type="checkbox"/> Cooperative	<input type="checkbox"/> Joint Management Bodies	<input type="checkbox"/> Charitable Organisation / Religious	<input type="checkbox"/> Foundation	<input type="checkbox"/> Association / Society / Agency	<input type="checkbox"/> Others (please specify)
<input type="checkbox"/> Cooperative	<input type="checkbox"/> Joint Management Bodies						
<input type="checkbox"/> Charitable Organisation / Religious	<input type="checkbox"/> Foundation						
<input type="checkbox"/> Association / Society / Agency	<input type="checkbox"/> Others (please specify)						

<p>AUTHORISED UTC</p> <p>Name: (as per NRIC)</p> <p>_____</p> <p>UTC Code: _____</p> <p>Date: _____</p>	<p>Form Received By:</p> <p>Name: _____</p> <p>Branch: _____</p> <p>Date: _____</p>	<p>Form Processed By:</p> <p>Name: (as per NRIC)</p> <p>_____</p> <p>_____</p> <p>Date: _____</p>
--	--	--