

## CUSTOMER INFORMATION FORM - INDIVIDUAL PRIVATE & CONFIDENTIAL

| AGENT                     |          |             |                                |          |
|---------------------------|----------|-------------|--------------------------------|----------|
|                           |          | PERSON      | AL INFORMATION                 |          |
| TITLE MR I                | MRS MS   | OTHERS      |                                |          |
| FULL NAME (AS PER NRIC/PA |          |             |                                |          |
| ( ) =                     | ,        |             |                                |          |
| NRIC/PASSPORT NO          |          |             |                                |          |
|                           |          |             |                                |          |
| DATE OF BIRTH (DD/MM/YY)  |          |             | PASSPORT EXPIRY DATE           |          |
| DATE OF BIRTH (DB/WWYTT)  |          |             | PASSPORT EXPIRED DATE          |          |
| NATIONALITY               |          |             |                                |          |
| NATIONALITY               |          |             |                                |          |
| TAY DECIDENCE             |          |             | TAVNO                          |          |
| TAX RESIDENCE             |          |             | TAX NO                         |          |
| OF NOTE OF                |          |             |                                |          |
| GENDER FEMALE             |          | SIN         | L STATUS  GLE MARRIED DIVORCED | )        |
| <u> </u>                  |          |             | <u> </u>                       |          |
|                           |          | CONTA       | CT INFORMATION                 |          |
| EMAIL                     |          |             |                                |          |
|                           |          |             |                                |          |
| CONTACT                   | (MOBILE) |             | (HOME)                         | (OFFICE) |
|                           |          |             |                                |          |
|                           |          |             |                                |          |
|                           |          | CORRESP     | ONDENCE ADDRESS                |          |
| ADDRESS                   |          |             |                                |          |
|                           |          |             |                                |          |
|                           |          |             |                                |          |
| POSTCODE                  |          |             | COUNTRY                        |          |
|                           |          |             |                                |          |
|                           |          |             |                                |          |
|                           |          | SOUF        | RCE OF INCOME                  |          |
| SAVINGS/BONUS             | SAVINGS  | INHERITANCI | COMMISSION                     |          |
| INVESTMENT PROCEEDS       | BUSIN    | ESS REVENUE | OTHERS                         |          |
| NATURE OF BUSINESS        |          |             |                                |          |
|                           |          |             |                                |          |
| ANNUAL INCOME             |          |             | ESTIMATED NET WORTH            |          |
|                           |          |             |                                |          |



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| BANK INFORMATION                 |                 |  |  |  |
|----------------------------------|-----------------|--|--|--|
| ACCOUNT NAME                     | SWIFT CODE      |  |  |  |
|                                  |                 |  |  |  |
| BANK NAME                        |                 |  |  |  |
|                                  |                 |  |  |  |
| ACCOUNT NO                       |                 |  |  |  |
|                                  |                 |  |  |  |
|                                  |                 |  |  |  |
| PRIMARY B                        | ENEFICIARY(IES) |  |  |  |
| FULL NAME (AS PER NRIC/PASSPORT) |                 |  |  |  |
|                                  |                 |  |  |  |
| NRIC/PASSPORT NO                 |                 |  |  |  |
| Things 7,000 on the              |                 |  |  |  |
| RELATIONSHIP                     | NATIONALITY     |  |  |  |
| RELATIONSHIP                     | NATIONALITY     |  |  |  |
|                                  |                 |  |  |  |
| MOBILE NO                        | EMAIL           |  |  |  |
|                                  |                 |  |  |  |
| ADDRESS                          |                 |  |  |  |
|                                  |                 |  |  |  |
|                                  |                 |  |  |  |
| POSTCODE                         | COUNTRY         |  |  |  |
|                                  |                 |  |  |  |
|                                  |                 |  |  |  |
| EMERGENCY (                      | CONTACT DETAILS |  |  |  |
| FULL NAME (AS PER NRIC/PASSPORT) |                 |  |  |  |
|                                  |                 |  |  |  |
| NRIC/PASSPORT NO                 |                 |  |  |  |
|                                  |                 |  |  |  |
| RELATIONSHIP                     | NATIONALITY     |  |  |  |
|                                  |                 |  |  |  |
| MOBILE NO                        | EMAIL           |  |  |  |
| MOSILE NO                        |                 |  |  |  |
| ADDRESS                          |                 |  |  |  |
| ADDITED                          |                 |  |  |  |
|                                  |                 |  |  |  |
|                                  |                 |  |  |  |
| POSTCODE                         | COUNTRY         |  |  |  |
|                                  |                 |  |  |  |



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| DISCLOSURE   |     |    |  |  |  |  |  |
|--|-----|----|--|--|--|--|--|
| ARE YOU A PERMANENT RESIDENT OF ANOTHER COUNTRY?   | YES | NO |  |  |  |  |  |
| DO YOU OWN ANY BUSINESS(ES) OUTSIDE OF MALAYSIA?   | YES | NO |  |  |  |  |  |
| HAVE YOU PREVIOUSLY RECEIVED ANY BANKRUPTCY ORDERS IN ANY JURISDICTION?  | YES | NO |  |  |  |  |  |
| IS YOUR SOURCE OF INCOME LEGITIMATE?   | YES | NO |  |  |  |  |  |
| HAVE YOU PREVIOUSLY RECEIVED ANY LEGAL NOTICE TO PAY OFF ANY OUTSTANDING LOANS?  | YES | NO |  |  |  |  |  |
| ARE YOU INVOLVED IN THE BUSINESS OF OR EMPLOYED BY THE EMPLOYERS CARRYING OUT THE BUSINESS INVOLVING MONEY CHANGERS, REMITTANCE AGENTS, PAWNBROKERS, CASINO, PRECIOUS STONES AND METAL DEALERS ("HIGH RISK BUSINESS")?   | YES | NO |  |  |  |  |  |
| DO YOU HAVE AN US TAXPAYER IDENTIFICATION NUMBER "TIN"?  | YES | NO |  |  |  |  |  |
| ARE YOU A POLITICAL EXPOSED PERSON (PEP)?  | YES | NO |  |  |  |  |  |
| ARE YOU CONNECTED TO ANY LOCAL AND/OR FOREIGN POLITICAL EXPOSED PERSON (PEP)?  | YES | NO |  |  |  |  |  |
| CONFIRMATION   |     |    |  |  |  |  |  |
| I, THE UNDERSIGNED, HEREBY DECLARE THAT THE INFORMATION PROVIDED IN THIS KYC FORM IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT PROVIDING FALSE OR MISLEADING INFORMATION MAY RESULT IN THE TERMINATION OF MY ACCOUNT AND COULD BE SUBJECT TO LEGAL ACTION. |     |    |  |  |  |  |  |
| I ALSO CONSENT TO THE USE OF MY INFORMATION FOR THE PURPOSES OF VERIFYING MY IDENTITY AND COMPLYING WITH APPLICABLE LAWS AND REGULATIONS, INCLUDING ANTI-MONEY LAUNDERING AND COUNTER-TERRORISM FINANCING REQUIREMENTS.  |     |    |  |  |  |  |  |
| I AGREE TO NOTIFY PRIME LANDMARK FUND LTD IMMEDIATELY OF ANY CHANGES TO THE INFORMATION PROVIDED IN THIS FORM.   |     |    |  |  |  |  |  |
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|  |     |    |  |  |  |  |  |
| SIGNATURE  |     |    |  |  |  |  |  |
| NAME   |     |    |  |  |  |  |  |
| DATE   |     |    |  |  |  |  |  |