CDS GUIDE FOR DEPOSITOR APPENDICES

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CDS GUIDE FOR DEPOSITOR APPENDICES

NO	TITLE
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27	Notification Of Winding-Up Of Company Form
28	eDividend Form



APPLICATION I Please read the instructions on the reverse before completing the Form.	FOR OPENING OF ACCOUNT	
OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. :	NEW NRIC NO. :	To be completed by ADA/ADM/Bursa Depository (where applicable)
NAME OF APPLICANT (AS PER NRIC/PASSPORT/AUTHORITY CARD/REGISTRATION DOCUMENT) :		PARTICIPANT TYPE :
ACCOUNT QUALIFIER (FOR TRUSTEES/CORPORATE BODY, IF ANY):		ADA/ADM CODE :
		INVESTOR TYPE :
REGISTERED ADDRESS OF APPLICANT (AS PER NRIC/PASSPORT/AUTHORITY CARD/REGISTRATIC	NA DOCUMENTA (OFF. NOTE IN	
REGISTERED ADDRESS OF APPLICANT (AS PER NRICIPASSPORT/AUTHORITY CARD/REGISTRATIC	IN DOCUMENT) (SEE NOTE 5) :	ACCOUNT TYPE (FOR ADA ONLY) :
POST CODE : TOWN :		BENEFICIARY :
STATE: COUNTRY:		STATE: COUNTRY:
CORRESPONDENCE ADDRESS :		
POST CODE: TOWN:		
STATE: COUNTRY:	TELEPHONE NO. :	STATE: COUNTRY:
GROSS (X) WHERE APPLICABLE NATIONALITY/PLACE OF INCORPORATION: (SEE NOTE 13)	RACE/OWNERSHIP:	NATL / PLACE OF INCORP :
() MALAYSIAN () FOREIGNER		RACE / OWNERSHIP :
DECLARATION BY APPLICANT/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)	DECLARATION BY DEALER'S REPRESENTATIVE/ADA'S NOTARY PUBLIC/OTHERS AS APPROVED BY BI (10 be completed when applicant is not present	URSA DEPOSITORY
*I/We hereby :- i. declare that I have attained 18 years of age (for individuals only)	I hereby affirm and attest that the particulars of the applicant have bee true and the *signature(s)/thumbprint(s) of the *applicant/authorised signature(s)	
declare that I am not an undischarged bankrupt (for individuals only)	attorney(s) belong(s) to the *applicant/authorised signatory(ies)/attorne have appeared in person before me.	
 agree to be bound by the Rules of Bursa Malaysia Depository Sdn Bhd (Bursa Depository) and any amendments thereto 	NAME :	
 agree to be bound by any procedures and/or directives issued by Bursa Depository 	NRIC NO. :	
 v. affirm that I have no other individual securities account maintained 		
with this Authorised Depository Agent (ADA) (for individuals only)	LICENCE NO. :	
with this Authorised Depository Agent (ADA) (for individuals only) vi. affirm that this account *is/is not for pledged securities vii. affirm that all the information stated in this Application Form and	(IF APPLICABLE)	
with this Authorised Depository Agent (ADA) (for individuals only) vi. affirm that this account "is/is not for pledged securities vii. affirm that all the information stated in this Application Form and Specimen Signature Cards is correct viii. undertake to notify the ADA/ Bursa Depository of any change of particulars or	(IF APPLICABLE) DESIGNATION :	
with this Authorised Depository Agent (ADA) (for individuals only) vi. affirm that this account "is/is not for pledged securities vii. affirm that all the information stated in this Application Form and Specimen Signature Cards is correct viii. undertake to notify the ADA/ Bursa Depository of any change of particulars or information provided by "me/us in this Application Form ix. declare that "I/We "am/are the "beneficial owner(s)/authorised	(IF APPLICABLE) DESIGNATION : SIGNATURE :	
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FMN010

FRONT

BURSA MA	LA	SIA			DU /	PE	(forme	rly k UR	nov KC	vn as Ma ORPOR	lays AT	ian (Central I	Depo KIL	osito _AN	ory Sdr I MEI	n Bh L Al	LUI SURAT KUA		
Pangkah (X) di mana perlu INDIVI					IDI\	/IDUA	L/(PELABU				? / P	юи	VER C	_	ATTORNEY ERWAKILAN MELAL	UI SURAT KUASA		
Cross (X) whichever is appli	icable			INDIVID	UAL					CORPOR	ATE	INV	ESTOR				Ρ	OWER OF ATTORNEY		
NO. AKAUN CDS : CDS ACCOUNT NO. :			_				-											ARIKH DIBUKA : ATE OPENED :		
NAMA PENDEPOSIT : NAME OF DEPOSITOR :																				
NO. K/P BARU/PASPOF NEW NRIC/PASSPORT/AU					RAN	ı: [NO. K/P LAMA : OLD NRIC NO. :		
Untuk kegunaan pelabur ii	ndividu	sahaja	For inc	dividual in	vestoi	r onl	y													
CONTOH TANDATANG. SPECIMEN SIGNATURE :	AN :																			
Untuk kegunaan Pelabur P	Corpora	at / Perwa	ıkilan	Melalui S	Surat	Kua	sa saha	nja <i>F</i>	For C	Corporate I	ives	stor / F	Power Of	Attori	ney u	ıse only	,			
		NAMA	NA/	ИЕ								KAT	ΓEGOR	l CA	TEG	ORY		TANE	ATANGAN SIGNATUR	₹E
METERAI SYARIKAT (Jika dipertukan oleh Resolusi Lembaga Pengarah) COMMON SEAL (If required by Board Resolution) Sila lengkapkan syarat-syarat tandatangan di bahag Please complete the conditions of signing at the back of the			gian bela				anda	ıtanı	gan ini.	В	BAC	ĸ					COP RASMI SYA COMPANY RUBBER			
Urusniaga	Urusniaga CDS Syarat-syarat Tandatangan																			
CDS Transactions					Conditions of Signing															
Semua urusniaga CDS All CDS Transactions																				
Aktiviti-aktiviti Pengurusan Akaun Account Management Activities																				
Pindahan																				
Transfer																				
Deposit																				
Deposit																				
Lain-lain (Sila nyatakan))																			
Others (Please specify)																				
							UI	NTU		KEGUNA FOR OF					λНА	JA				
Pemohon tidak m	Pemohon menghadirkan diri Applicant is present in person Pemohon tidak menghadirkan diri. Disaksi oleh Wakil Peniaga / Pegawai ADA yang Diberi Kuasa / Notari Awam / Lain-lain yang diluluskan oleh Bursa Depository Applicant is not present in person. Witnessed by Dealer's Representative / ADA's Authorised Officer(s) / Notary Public / Others as approved by Bursa Depository																			
Diuruskan oleh Attended by																				
Jawatan : Designation :											_									
Tandatangan Signature Tarikh											_							Lekatkan cop ra	smi syarikat	

Affixation of company rubber-stamp

USAGE OF POWER OF ATTORNEY

The following requirements must be fulfilled for the usage of a Power of Attorney in CDS transactions:-

- 1. The Power of Attorney must have been registered in the High Court of Malaya.
- 2. The Power of Attorney must be executed before the persons stated hereunder:
 - a. If executed within West Malaysia, the instrument is to be executed before:
 - i. A Magistrate, or
 - ii. A Justice of the Peace, or
 - iii. A Land Administrator, or
 - iv. A Notary Public, or
 - v. A Commissioner for Oaths, or
 - vi. An advocate and solicitor, or
 - vii. An officer, acting in the course of his employment, or a company carrying on the business of banking in West Malaysia and incorporated by or under any written law in force in West Malaysia, or
 - b. If executed outside West Malaysia, the execution of such instrument is executed before:
 - i. A Notary Public, or
 - ii. A Commissioner for Oaths, or
 - iii. Any Judge, or
 - iv. A Magistrate, or
 - v. A British Consul or Vice-Consul, or
 - vi. A representative of Her Britanic Majesty, or
 - vii. On and after Merdeka Day, any Consular Officer in Malaysia

- viii. In the case of an instrument executed in the Republic of Singapore, an advocate and solicitor of the Supreme Court of the Republic, or an officer, acting in the course of his employment, of a company carrying on the business of banking in the Republic and incorporated by or under any written law of the Republic.
- 3. Ensure that the Power of Attorney empowers the Donee to deal in securities.
- 4. An original certified true copy of the Power of Attorney document must be lodged with the ADA. For Individual and corporate depositors, the Power of Attorney can be certified by a person stated in the List Of Acceptable Witnesses in Chapter 10. In addition, for a corporate body, the Power of Attorney can be certified by the company director, company secretary or any other persons authorised to do so in the Memorandum and Article of Association of that particular company.
- 5. Where the Power of Attorney is to be used, the ADA must affix the rubber-stamp bearing the following declaration on the Application For Opening Of Account Form (FMN010) for completion by the Donee:-

" I/We as stated herebelow hereby affirm that the Power of Attorney dated
bearing Registration No pursuant to which this form is executed has not been
revoked and I/We undertake to notify Bursa Depository of any revocation of this Power of
Attorney.

NAME/S OF DONEE(S)	NRIC/PASSPORT/REG. NO

- 6. Donee(s) to complete(s) the Name and NRIC / Passport / Reg. No of the Donor, state(s) the conditions of signing and sign(s) the Specimen Signature Cards in accordance with the Power of Attorney.
- 7. Donee to submit a copy of his identification document (NRIC / Passport / Certificate of Incorporation) must be obtained and must be verified against the original document.
- 8. If the Donee is/are an individual(s), the Donee must be above 18 years of age.
- 9. Where the Donee is an individual, it is mandatory for the individual to be present in person to the ADA unless is waived by the ADA.

CRITERIA FOR BOARD RESOLUTION

The four basic criteria required by Bursa Depository in a corporate investor's Board Resolution are:-

- Authorisation for the company to open and operate CDS account(s)
 (The phrase "authorisation to open and operate CDS account(s)" is essential as the words 'open' and 'operate' are two different and separate actions, respectively).
- ii. List of **authorised signatories** to execute CDS documents for opening and operation of the CDS account(s)
 - (A list of authorised signatories must be provided to enable identification of the persons authorised to execute CDS documents for opening and operation of the CDS account(s) of a corporate body).
- iii. **Mode and manner** of execution by the appointed authorised signatories of CDS documents (Where more than one authorised signatory is authorised to execute any CDS documents, the mode and manner of execution must be clearly stipulated in the Board Resolution).
- iv. Whether **affixation** of common seal of the company on all or certain specified CDS documents is required.

The following is an example of a Board Resolution incorporating the above criteria:-

RESOLVED:

- 1. That authority be and is hereby given to the **Company** to **open** Securities Accounts with Bursa Malaysia Depository Sdn Bhd ("Bursa Depository") and to **operate** the Securities Accounts in accordance with the Rules of Bursa Malaysia Depository Sdn Bhd.
- 2. That until and unless otherwise resolved by the Company's Board of Directors, the following **personnel** be and are hereby authorised to **open** and **operate** the aforesaid Securities Accounts hereinstated:

The following are some examples of the mode and manner of execution available:

Example 1

That **any one** of the following persons is authorised to execute CDS documents pertaining to the opening and operation of the CDS accounts:

	Name	Designation
i.	A	CEO
ii.	B	Director
iii.	C	Director
iv.	D	Company Secretary
ν.	E	GM

Example 2

That the following persons are authorised to execute CDS documents **jointly** pertaining to the opening and operation of CDS accounts:

	Name	Designation
i.	A	Director
ii.	B	Company Secretary

OR

Example 3

That any two/three/four of the following persons are authorised to execute CDS documents pertaining to the opening and operation of the CDS accounts:

	Name	Designation
i.	A	Executive Director
ii.	В	Director
iii.	C	Director
iv.	D	Company Secretary
<i>v</i> .	E	Manager

Note:

It is not mandatory for corporate bodies to affix their common seal on the CDS documents. Affixation of common seal is at the discretion of the corporate body.

- i. If the corporate body wishes to affix its common seal, the ADA must ensure that it is clearly stipulated in the Board Resolution. Alternatively, if the common seal is required in respect of certain documents only, the company must specify the documents upon which the common seal is to be affixed.
- ii. If the Board Resolution does not authorise usage of the common seal i.e.
 if it is silent, the common seal must not be affixed on any document.
 Instead the corporate body's company rubber-stamp must be affixed.

CHECKLIST FOR OPENING OF ACCOUNT FOR TRUST FOUNDATION, SOCIETY, STATUTORY BODY AND FOREIGN INCORPORATED COMPANIES

A. TRUST FOUNDATION

- 1. Original certified true copy of:
 - a. Trust Deed
 - b. Certificate of Registration
 - c. Minutes of meeting
 - d. Power of Attorney (if applicable), and
 - e. Two (2) completed specimen signature cards / two (2) original certified true copies of the list of authorised signatory(ies).
- 1. In the case where a Power of Attorney is used to transact on behalf of the Trust Foundation, then the following need to be adhered to:
 - a. The minutes of the meeting authorises the use of a Power of Attorney
 - b. The Power of Attorney has been registered with the High Court of Malaya
 - c. The Power of Attorney document specifies the Donee's power to deal in securities
 - d. The Donee must produce the following:
 - i. Two (2) copies of NRIC which must be verified against the original. Also ensure that the name of the Donee mentioned in the Power of Attorney corresponds with the NRIC
 - ii. Two (2) copies of specimen signature cards to be completed by the Donee.
- B. SOCIETY REGISTERED UNDER THE SOCIETIES ACT 1966 AND CO-OPERATIVES ACT 1993
 - 1. Original certified true copy of:-

- a. Constitution of the society / cooperative (to determine the object clause)
- b. Rules of the Society / Bylaws of the Cooperative
- c. Certificate of Registration
- d. Minutes of meeting / Board Resolution.
- 2. The Constitution of the Society / Cooperative allows the society / cooperative to deal in securities.
- 3. Where a Power of Attorney is utilised to transact on behalf of the society, then the following need to be adhered to:
 - a. The Board Resolution authorises the use of a Power of Attorney
 - b. The Power of Attorney has been registered in the High Court of Malaya
 - c. The Power of Attorney document specifies the Donee's power to deal in securities
 - d. The Donee must produce the following:
 - i. Two (2) copies of the NRIC which must be verified against the original. Also ensure that the name of the Donee mentioned in the Power of Attorney corresponds with the NRIC
 - ii. Two (2) copies of the specimen signature cards completed by the Donee(s).
- C. CORPORATIONS INCORPORATED BY AN ACT OF PARLIAMENT OR STATE ENACTMENT AND OTHER STATUTORY BODIES (FEDERAL AND STATE)
 - 1. Original certified true copy of:
 - a. Board / Investment Panel's Resolution
 - b. Power of Attorney (where applicable)
 - c. In respect of statutory body other than EPF, LUTH, SOCSO, LTAT, a copy of the Act / Enactment incorporating the said body.
 - 2. Where a Power of Attorney is used to transact on behalf of the company, then the following need to be adhered to:-

- a. The Board Resolution authorises the use of a Power of Attorney
- b. The Power of Attorney has been registered with the High Court of Malaya
- c. The Power of Attorney document specifies the Donee's power to deal in securities
- d. The Donee must produce the following:
 - i. Two (2) copies of the NRIC which must be verified against the original. Also ensure that the name of the Donee mentioned in the Power of Attorney corresponds with the NRIC
 - ii. Two (2) copies of the specimen signature cards completed by the Donee.

D. FOREIGN INCORPORATED COMPANIES

Submit an original certified true copy of the foreign incorporated company's equivalent of the legal documentation to support evidence of ownership, registered address, company name, registration number and place of incorporation.

All documents in a foreign language must be accompanied by an English translated copy. Both documents, i.e. the foreign document and the English copy, must be certified by a person stated in the List Of Acceptable Witnesses in Chapter 10.

LETTER OF INDEMNITY FOR FACSIMILE SIGNATURES

To:

Bursa Malaysia Depository Sdn Bhd		
6 th Floor Exchange Square		
Bukit Kewangan 50200 Kuala Lumpur		
30200 Radia Edilipai		
Dear Sir,		
In consideration of your having agreed to our prescribed CDS Forms (hereinafter referred to impressed with the facsimile signatures of _ specimen of which is furnished herewith, we heffect the transactions requested for in the said aforesaid and presented to your Authorised transactions and we also hereby agree to indeminate the said aforesaid and presented to your Authorised transactions and we also hereby agree to indeminate the said aforesaid and presented to your Authorised transactions and we also hereby agree to indeminate the said agree to indeminate the said and presented to your Authorised transactions and we also hereby agree to indeminate the said agree the said agree to indeminate the said agree the said agree the said agree to indeminate the said agree the said agree the said agree to indeminate the said agree	as "the said Forms") hereby agree and configure Forms which are executed Depository Agents	bearing our common seal and and, a firm that you may accept and ecuted by us in the manner as for effecting the requested
We also agree and confirm that you will be in use of the instrument or equipment for impressions or any other forms to be introduced by will be under no duty to enquire into the genuin appearing on any of the said Forms.	essing the facsimile s Bursa Depository fro	ignatures on any of the said om time to time and that you
We hereby undertake:-		
(a) at all times to keep our instrument or ea when in use by our duly authorised office to you immediately, if the same is stolen	er(s)] securely locked	
(b) to indemnify you, and keep you indedemands, costs, damage expenses and a be put in consequence of your accepting signatures instead of the autographic signatures.	ll other liabilities of vand effecting the said	whatsoever nature which may Forms bearing such facsimile
Dated this day of	, ,	. уууу
The Common Seal of)	
)	
was hereunto fixed in the)	
presence of:)	
	Director	Director / Secretary

PERMOHONAN UNTUK MENGAKTIFKAN AKAUN CDS Application for Reactivation of CDS Account					
Bahagian 1 Part 1:					
Untuk diisi oleh pendeposit To be completed by depositor					
Citate and other penaceposits. To be completed by depositor					
Pangkah (X) yang berkenaan / Cross (X) where applicable					
AKAUN DORMAN / Dormant Account	AKAUN TIDAK AKTIF / Inactive Account				
NOMBOR AKAUN CDS CDS ACCOUNT NUMBER :					
NO. KP. LAMA/PASPORT/ANGGOTA TENTERA/POLIS/PENDAFTA	RAN : * NO. KP. BARU :				
Old NRIC/Passport/Armed Forces/Police Personnel/Reg. No.: *	RAN: * NO. RP. BARU: New NRIC Number:				
Ott NATC/1 assport/Armed 1 orces/1 ouce 1 ersonitet/Reg. 1vo	New NATE Number :				
NAMA PENDEPOSIT Name of Depositor					
AKAUN KELAYAKAN (UNTUK KEGUNAAN BADAN KORPORAT	SAHAJA):* Account Qualifier (For Corporate Body, if any): *				
*Saya/Kami dengan ini memohon untuk mengaktifkan akaun di atas dari stat dorman/tidak aktif kepada status aktif. *I/We hereby wish to activate the above account from dormant/inactive status to active status. *TANDATANGAN PENDEPOSIT /PENANDATANGAN DIBERIKUASA/PERWAKILAN MELALUI SURAT KUASA *Signature of Depositor/Authorised Signatories/Attorney (s) ** Date					
** Lekatkan meterai rasmi syarikat atau cop rasmi syarikat (di mana perlu ** Affixation of common seal or co. rubber-stamp (where applicable)					
UNTUK KEGUNAAN PEJAI	BAT SAHAJA For Office Use Only				
Untuk diisi oleh ADA/ADM* To be completed by ADA/ADM* (Tandatangan dan lekatkan cop rasmi syarikat) (Sign and affix company rubber-stamp)					
BAYARAN DITERIMA DAN RESIT DIKELUARKAN (untuk akaun dorman) YA TIDAK Payment received and receipt issued (for dormant account) Yes No					
DISAHKAN OLEH :	TARIKH :				
DILULUSKAN OLEH :Approved By	TARIKH :				
DIAKTIFKAN OLEH : Reactivated By	TARIKH DIAKTIFKAN : Reactivated On				
*POTONG YANG TIDAK BERKENAAN *Delete where inapplicable					

PERMOHONAN PENUTUPAN AKA APPLICATION FOR CLOSING OF ACCO					
NO, AKAUN CDS CDS ACCOUNT NO. :	, , , , , , , , , , , , , , , , , , , 				
NO. K/P LAMA/PASPORT/KAD KUASA/PENDAFTARAN OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. :	NO. K/P BARU NEW NRIC NO. :				
NAMA PENDEPOSIT NAME OF DEPOSITOR:					
AKAUN KELAYAKAN (UNTUK BADAN-BADAN AMANAH/KORPORAT, JIKA ADA) ACCOUNT QUALIFIER (FOR TRU	STEES/CORPORATE BODY, IF ANY) :				
Saya/Kami dengan ini I/We hereby:- i. ingin menutup akaun sekuriti saya/kami berkuatkuasa dari wish to close my/our securities account effective from :-					
TANDATANGAN PENDEPOSIT / PENANDATANGAN DIBERI KUASA* SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORY(IES)* * Lekatkan meterai syarikat atau cop rasmi syarikat (di mana perlu) Affixation of common seal or company rubber-stamp (where applicable)					
Untuk diisi oleh ADA/Bursa Depository To be completed by ADA /Bursa Depository [Tandatangan dan lekatkan cop rasmi syarikat (dikehendaki bagi ADA)] [Sign and affix company rubber-stamp (require					
DISEMAK OLEH VERIFIED BY : TAF	IKH DATE :				
DILULUSKAN OLEH APPROVED BY : TAP	IKH DATE :				
DATA DIMASUKKAN OLEH DATA ENTRY BY : TAF	IKH DATE :				
AKAUN CDS DITUTUP PADA CDS ACCOUNT CLOSED ON :					

FMN040

CHECKLIST FOR REQUEST FOR SUSPENSION OF DEPOSITED SECURITIES IN A DECEASED DEPOSITOR'S CDS ACCOUNT

1. A request for suspension of deposited securities in a securities account can only be made by the estate of the deceased (hereinafter known as "the applicant").

Where the appointment of the Administrator / Administratrix of the estate / Official Administrator appointed by the Court, is yet to be made, a request for suspension of deposited securities in a securities account may be made in the following order and manner:-

- a. Where the deceased was married at the time of death, the following persons (hereinafter known as "the applicant") living and in the following order and manner may apply:
 - i. Surviving husband or wife and if there is no surviving husband / wife then
 - ii. Any child of the deceased who has attained 18 years of age and if the deceased leaves no children above 18 years of age then
 - iii. Father or Mother of the deceased and if there are no parents surviving then
 - iv. A brother / sister of the deceased and if there is no such person then
 - v. A Grandparent of the deceased
- b. Where the deceased was of an unmarried status at the time of death, the following persons living and in the following manner and order may apply:
 - i. Father or Mother of the deceased and if there are no parents surviving then
 - ii. A brother / sister of the deceased and if there is no such person then
 - iii. A Grandparent of the deceased.
- 2. In addition to a completed Suspension / Release Of Suspension Of Securities Request Form (FMN030), the applicant must forward a set of the following documents, duly certified by a person stated in the List Of Acceptable Witnesses in Chapter 10 (pending extraction of the Letter Of Administration / Grant Of Probate, as the case may be):
 - a. Death certificate, and
 - b. Birth certificate (if the applicant is the child / parent / brother / sister), or

- c. Marriage certificate (if the applicant is the spouse), and
- d. NRIC of the applicant and such documents as Bursa Depository (Bursa Depository deems necessary.
- 3. The applicant has to indicate his / her relationship with the deceased beside his / her signature.

PERMOHONAN PENGEMASKINIAN BUTIRAN AKAUN	
APPLICATION FOR UPDATING OF ACCOUNT PARTICULARS Bahagian 1 : Untuk diisi oleh pendeposit Part 1 : To be completed by depositor	
NAMA PENDEPOSIT NAME OF DEPOSITOR: NO. AKAUN CDS	CDS ACCOUNT NO. :
Bahagian 2 : Sila pangkah (X) bagi penukaran yang dikehendaki Part 2 : Please cross (X) for change(s) required	
NO. K/P LAMA/PASPORT/KAD KUASA/PENDAFTARAN: OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. : NO. K/P BARU: NO. K/P BARU: NEW NRIC NO. :	Untuk diisi oleh ADA/ADM/Bursa Depository (di mana perlu) To be completed by ADA/ADM/Bursa Depository (where applicable)
() NAMA PENDEPOSIT NAME OF DEPOSITOR :	JENIS PELABUR INVESTOR TYPE :
AKAUN KELAYAKAN (UNTUK BADAN-BADAN AMANAH/KORPORAT, JIKA ADA)	
ACCOUNT QUALIFIER (FOR TRUSTEES/CORPORATE BODY, IF ANY):	JENIS AKAUN ACCOUNT TYPE :
	BENEFISIARI BENEFICIARY:
ALAMAT BERDAFTAR (SEPERTI DI DALAM K/P/PASPORT/KAD KUASA/DOKUMEN PENDAFTARAN PERNIAGAAN)(SILA LIHAT NOTA (REGISTERED ADDRESS (AS PER NRIC/PASSPORT/AUTHORITY CARD/BUSINESS REGISTRATION DOCUMENT)(SEE NOTE 6):	5):
() POSKOD POST CODE: () BANDAR TOWN:	NEGERI STATE:
() NEGERI STATE: () NEGARA COUNTRY:	NEGARA COUNTRY:
() ALAMAT SURAT-MENYURAT CORRESPONDENCE ADDRESS:	
() POSKOD POST CODE: () BANDAR TOWN:	NEGERI STATE:
() NEGERI STATE: () NEGARA COUNTRY: NO. TELEFON: TELEPHONE NO.:	NEGARA COUNTRY:
() WARGANEGARA/TEMPAT DIPERBADANKAN NATIONALITY/ PLACE OF INCORPORATION : () BANGSA/HAKMILIK RACE/OWNERSHIP :	WARGANEGARA/TPT DIPERBADANKAN : NATL/PLACE OF INCORP :
	BANGSA/HAKMILIK RACE/OWNERSHIP:
TANDATANGAN PENDEPOSIT / PENANDATANGAN DIBERI KUASA* SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORY(IES)* * Lekatkan meterai syarikat atau cop rasmi syarikat (di mana perlu) Affixation of common seal or company rubber-stamp (where applicable)	
UNTUK KEGUNAAN PEJABAT SAHAJA FOR OFFICE USE ONLY Untuk diisi oleh ADA/ADM/Bursa Depository To be completed by ADA/ADM/Bursa Depository	
[Tandatangan dan lekatkan cop rasmi syarikat (dikehendaki bagi ADA)] [Sign and affix company rubber-stamp (required for ADA)]	
DISEMAK OLEH VERIFIED BY : TARIKH 1	NATE :
DILULUSKAN OLEH APPROVED BY : TARIKH 1	ATE :
DATA DIMASUKKAN OLEH DATA ENTRY BY : TARIKH 1	NATE :

FMN020

Updates Of Investor Particulars and the Supporting Documents Required

Types Of Changes	Individual	Corporate Depositor
1. Investor ID	Two (2) copies of NRIC / Passport / Authority Card or other forms of acceptable identification documents.	One (1) original certified true copy of Form 13 (if applicable) or Letter of Confirmation from Companies Commission Of Malaysia (CCM) or any other confirmation letter from relevant authority.
2. Registered Address	Two (2) copies of NRIC / Passport / Authority Card or other forms of acceptable identification documents indicating the change in registered address. ADA to raise the FMN020 in cases of data entry error and send to Bursa Depository.	One (1) original certified true copy of Form 44 or its equivalent.
3. Investor Type	ADA to raise the FMN020 in cases of data entry error and send to Bursa Depository.	One (1) original certified true copy of Form 19 – Certificate Of Incorporation On Conversion To A Private Company or Form 20 – Certificate Of Incorporation On Conversion To A Public Company.
4. Nationality / Place of Incorporation	ADA to raise the FMN020 in cases of data entry error and send to Bursa Depository.	One (1) original certified true copy of Form 8 or 9 or its equivalent.
5. Name	Two (2) copies of NRIC / passport / Authority Card or other forms of acceptable identification documents.	One (1) original certified true copy of Form 13 or its equivalent.
6. Race / Ownership	The update will be according to the declaration made by the depositor in FMN020.	One (1) certified true copy of Form 24 or if unavailable, the latest Annual Return or its equivalent.

PERMOHONAN PENGGANTUNGAN / PELEPASAN PENGGANTUNGAN SEKURITI APPLICATION FOR SUSPENSION / RELEASE OF SUSPENSION OF SECURITIES		
NO. AKAUN CDS CDS ACCOUNT NO.:		
NO. KP. LAMA/PASPORT/KAD KUASA/PENDAFTARAN : OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. :	NO. KP. BARU NEW NRIC NO.:	
NAMA PENDEPOSIT NAME OF DEPOSITOR:		
BAHAGIAN I PART I PENGGANTUNGAN SUSPENSION		
Sila pangkah (X) yang berkenaan / Please cross (X) where applicable		
KELAS PENGGANTUNGAN TYPE OF SUSPENSION:		
PENGGANTUNGAN AKAUN ACCOUNT SUSPENSION PENGGANTUNGAN SEKURITI SUSPENSION OF SECURITIES		
KOD SEKURITI SECURITIES CODE: NAMA SEKURITI NAME OF SECURITIE.	S: KUANTITI <i>QUANTITY:</i>	
SEBAB PENGGANTUNGAN REASON FOR SUSPENSION:		
SEBAB I ENGGAN TONASUSI ENSION.		
BAHAGIAN II PART II PELEPASAN PENGGANTUNGAN RELEASE O	DF SUSPENSION	
Sila pangkah (X) yang berkenaan / Please cross (X) where applicable		
KELAS PELEPASAN TYPE OF RELEASE OF SUSPENSION:		
PELEPASAN PENGGANTUNGAN AKAUN RELEASE OF ACCOUNT SUSPI PELEPASAN PENGGANTUNGAN SEKURITI RELEASE OF SUSPENSION O		
KOD SEKURITI SECURITIES CODE: NAMA SEKURITI NAME OF SECURITIE.	S: KUANTITI <i>QUANTITY</i> :	
KOD SEKONTI SECONTES CODE. INIMAT SEKONTI INIME OI SECONTES		
TANDATANGAN PENDEPOSIT / PENANDATANGAN DIBERI KUASA* SIGNATURE OF DEPOSITOR/AUTHORISED SIGNATORY(IES)* *Lekatkan meterai syarikat atau cop rasmi syarikat (di mana perlu) Affix common seal or	TARIKH DATE company rubber-stamp (where applicable)	
UNTUK KEGUNAAN PEJ.	ABAT SAHAJA FOR OFFICE USE ONLY	
LINTLY DIRECTED ADA / ADM TO DE COMPLETED BY ADA / ADM		
UNTUK DIISI OLEH ADA / ADM TO BE COMPLETED BY ADA / ADM (Tandatangan dan lekatkan cop rasmi syarikat)(Sign and affix company rubber-stamp)	UNTUK DIISI OLEH BURSA DEPOSITORY TO BE COMPLETED BY BURSA DEPOSITORY	
DIPERIKSA OLEH :	DISEMAK OLEH : TARIKH DATE	
CHECKED BY TARIKH DATE		
DISEMAK OLEH : TARIKH DATE	DILULUSKAN OLEH : TARIKH DATE	
	DATA DIMASUKKAN OLEH: DATA ENTRY BY TARIKH DATE	

CHECKLIST FOR SUSPENSION / RELEASE OF SUSPENSION OF SECURITIES

- 1. Ensure that only one (1) Suspension / Release Of Suspension Of Securities Request Form (FMN030) can be used in respect of one (1) securities account. If the application for suspension / release of suspension covers more than one (1) securities account, the depositor / applicant is required to submit the requisite number of FMN030s.
- 2. Ensure that the following details have been filled in the FMN030:
 - a. CDS account number
 - b. Depositor's NRIC No. / Passport No. / Reg. No. / Authority Card No.
 - c. Name of depositor
 - d. Account qualifier (if any)
 - e. Details for Part 1 Suspension (if applicable):
 - i. The relevant suspension instruction has been selected
 - ii. Securities code(s) and name(s)
 - iii. Quantity of securities to be suspended
 - iv. Reason(s) for suspension
 - v. Effective date for suspension
 - f. Details for Part 2 Release Of Suspension (if applicable):
 - i. The relevant release of suspension instruction has been selected
 - ii. Suspended securities code(s) and name(s)
 - iii. Quantity of suspended securities to be released
 - iv. Effective date for release of suspension.
- 3. Ensure the signature / thumbprint of depositor in FMN030 / letter corresponds with the ADA's records of specimen signature(s) where applicable.
- 4. Ensure the signature of the applicant on FMN030 is duly witnessed by a person stated in the List Of Acceptable Witnesses in Chapter 10.

5.	Where the FMN030 has been executed by a person who is not able to read or understand the content, it should be accompanied by a Jurat Clause. The Jurat Clause needs to be affixed and signed by a person stated in the List Of Acceptable Witnesses in Chapter 10.
	Jurat Clause:-

I (NRIC No) have distinctly, clearly and audibly interpreted the
above in the language/dialect to the abovenamed person who seemed to clearly
understand the above and who made his/her mark in my presence.

- 6. Where the execution is pursuant to Power of Attorney or Board Resolution, ensure the following:
 - a. Person executing is the person named in the Power of Attorney / Board Resolution
 - b. Person executing is authorised to carry out that particular transaction.

Signed by

- 7. In the case of a corporate body where there is a requirement to affix the common seal, ensure that the affixation is done in accordance with the Memorandum & Articles of Association of that corporate body. Affix the company rubber-stamp if the Board Resolution does not require the common seal to be affixed.
- 8. Where the FMN030 is signed under the Power of Attorney, please refer to the Usage Of Power Of Attorney (Appendix 3) to ensure that the Power of Attorney is in order and that persons signing the form are empowered to do so.
- 9. Every amendment made on the form must be countersigned by the depositor and the Authorised Signatory(ies) of the ADA. Do not use correcting fluid. Cancel the error and make the correction
- 10. Ensure that the date on FMN030 is not postdated. However, the effective date for the suspension / release of suspension is the date stated in the Account Suspension Notice / Release Of Account Suspension Notice or the Securities Suspension Notice / Release Of Securities Suspension Notice (whichever is applicable).

BALANCE ENQUIRY REQUEST		
NAME OF DEPOSITOR:	OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. : NEW NRIC NO. :	
Kindly complete Part 1, 2 and 3 and cross (X) whichever is applicable		
Killuly complete Fatt 1, 2 and 3 and closs (\(\lambda \) will diever is applicable		
PART 1 () CDS ACCOUNT NO.:		
PART 2		
NAME OF SECURITIES :-		
() All securities or		
() A specific securities		
BALANCE REQUESTED BY:- () Depositor () Dealer's Representative (DR) () Person authorised by the Depositor (other than the DR)		
SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORY(IES)/ ATTORI **Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable)	NEY(S) / DEALER'S REPRESENTATIVE / OTHERS * DATE	
FOF	OFFICE USE ONLY	
To be completed by ADA Sign and affix company rubber-stamp (required for ADA)		
APPROVED BY :	DATE :	
BALANCE RELEASED BY :	DATE :	

AUTHORISATION FOR BALANCE ENQUI	RY REQUEST
NAME OF DEPOSITOR:	OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. : NEW NRIC NO. :
Please cross (X) whichever is applicable () CDS ACCOUNT NO.: or () *All CDS accounts that have been opened as at the day of this application and any future CDS account or () *Attached list of CDS accounts Note: * only applicable for corporate depositor using a single form for more than 1 (one) CDS account.	to be opened
I, the abovenamed hereby authorise	(state the name of the dealer's representative)
(I/C number) License No	
 The abovestated dealer's representative is authorised to execute on my behalf the Balance Enquiry Request Bursa Malaysia Depository Sdn Bhd ("Bursa Depository") The authority hereby given shall take effect on the date stipulated in the notice of acceptance, the same to be two (2) market days after receipt of this authorisation by the ADA and shall remain in force, as per the follow (Please choose the authorisation period by crossing (X) at the appropriate field below)	be issued by the ADA to me not later than ring period:- writing in accordance with the prescribed e authorised Dealer's Representative concerned) and Bursa Depository from all liabilities of rea Depository or the authorised depository are result of any unauthorised acts of the
SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORY(IES)/ ATTORNEY(S)* **Delete whichever applicable ***Affixation of common seal or company rubber-stamp (where applicable) SIGNATURE OF THE ABOVESTATED DEALER'S REPRESENTATIVE	DATE
FOR OFFICE USE ONLY	
To be completed by ADA Sign and affix company rubber-stamp (required for ADA)	
RECEIVED BY :	TIME / DATE :
VERIFY BY :	DATE :
APPROVED BY :	DATE :

Please close (X) whichever is applicable Please close (X) whichever is applicable Please close (X) whichever is applicable	REVOCATION OF AUTHORI	SATION FOR BALANCE ENQUIRY REQUEST
Please cross (X) whithwer is applicable (C) CSS ACCUMT NO.:	NAME OF DEPOSITOR :	OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. :
CDS ACCOUNT NO.:		
(state the name of the dealer's representative)	or () *AII CDS accounts or () *CDS accounts or () *CDS accounts as specified on the list of CDS accounts lodged together.	
any securities of any company. 2. I agree and acknowledge that the revocation shall take effect on the date stipulated in the notice of acceptance of revocation, the same to be issued by the ADA to me not later than two (2) market days after receipt of this revocation by the ADA. **SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORY(IES)/ ATTORNEY(S) *** **Delete whichever applicable **Toblete whichever applicable **FOR OFFICE USE ONLY To be compileted by ADA **Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
"SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORY(IES)/ ATTORNEY(S) "" "Delete whichever applicable "Afficiation of common seal or company rubber-stamp (where applicable) FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY: "IME / DATE: "IME / DATE:		to make a balance enquiry of my abovestated CDS Account in respect of
**Delete whichever applicable **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
*Delete whichever applicable **FOR OFFICE USE ONLY FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY : **DATE **TIME / DATE : **DATE **DATE DATE **DATE **DATE		
*DATE **Affixation of common seal or company rubber-stamp (where applicable) FOR OFFICE USE ONLY For be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY : TIME / DATE : /ERIFY BY DATE :		
**Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable) **FOR OFFICE USE ONLY **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
FOR OFFICE USE ONLY FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY IMPROVED IN TIME / DATE IMPROVED IN		
**Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable) **FOR OFFICE USE ONLY **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
**Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable) **FOR OFFICE USE ONLY **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
**Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable) **FOR OFFICE USE ONLY **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
**Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable) **FOR OFFICE USE ONLY **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
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FOR OFFICE USE ONLY FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY IN TIME / DATE		
FOR OFFICE USE ONLY FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY IMPROVED IN TIME / DATE IMPROVED IN		
**Delete whichever applicable **Affixation of common seal or company rubber-stamp (where applicable) **FOR OFFICE USE ONLY **To be completed by ADA Sign and affix company rubber-stamp (required for ADA) **RECEIVED BY :		
FOR OFFICE USE ONLY FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY IN TIME / DATE		
FOR OFFICE USE ONLY FOR OFFICE USE ONLY To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY IMPROVED IN TIME / DATE IMPROVED IN		
FOR OFFICE USE ONLY Fo be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY :	*Delete whichever applicable	
To be completed by ADA Sign and affix company rubber-stamp (required for ADA) RECEIVED BY :		
TIME / DATE	F	JK OFFICE USE UNLY
ZERIFY BY : DATE :		
/ERIFY BY : DATE :	RECEIVED BY :	TIME / DATE :
	/ERIFY BY :	
	APPROVED BY :	DATE :

FEQ015 AD-HOC STATEM	ENT REQUEST
CDS ACCOUNT NO:	NRIC/PASSPORT NO. REG. NO:
NAME OF ACCOUNT HOLDER:	
PERIOD OF AD-HOC STATEMENT REQUIRED FROM:	
SIGNATURE OF ACCOUNT HOLDER	DATE
FOR OFFICE To be completed by ADA (Sign and affix company's rubber stamp)	USE ONLY
ATTENDED BY:(Authorised signatory)	DATE :

PENGGABUNGAN/PEMBATALAN PENG CONSOLIDATION/REVOCATION OF CONSOL		
Sila pangkah (X) yang berkenaan Please cross (X) where applicable	IDATED CDS STATEMENT OF ACC	Untuk diisi oleh ADA
PENGGABUNGAN PENYATA AKAUN CDS CONSOLIDATION OF CDS STATEMENT O	F ACCOUNT	To be completed by ADA
PEMBATALAN PENGGABUNGAN PENYATA AKAUN CDSREVOCATION OF CONSI		
NOMBOR AKAUN CDS CDS ACCOUNT NUMBER :		
NO. KP. LAMA/PASPORT/KAD KUASA/PENDAFTARAN : OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO. : NO. 1	KP. BARU NEW NRIC NO.:	
NAMA PENDEPOSIT NAME OF DEPOSITOR :		
AKAUN KELAYAKAN (UNTUK KEGUNAAN BADAN KORPORAT SAHAJA) : ACCOUNT QUALIFIER (FOR CORPORATE BODY ONLY) :		
	 	
ALAMAT SURAT- MENYURAT CORRESPONDENCE ADDRESS:		
ALAMAT SUKAT SUKAT COMMENCE ADDRESS .		
POSKOD POST CODE: BANDAR TOWN:		NEGERI STATE:
NEGERISTATE: NEGARA COUNTRY: NO. TELEFO	ON TELEPHONE NO.:	NEGARA COUNTRY:
NEGERISIATE: NEGARA COUNTRY: NO. 1ELEPT	ON TELEPHONE NO.:	NEGARA COUNTRY:
MUSTAHAK IMPORTANT	CDC I D . Al . CI . I'l	. 13 1
Penggabungan Penyata Akaun CDS akan menyelaraskan penghantaran semua not Sekiranya anda tidak lagi mahu menerima Penyata Akaun Gabungan, Bursa Depo		
Penyata-penyata Akaun CDS kecuali jikalau pengemaskinian alamat surat-menyu	rat bagi setiap akaun dibuat dengan menggunakan be	rang yang telah ditetapkar
Bursa Depository. Bursa Depository will send all future CDS notices and Consolidated CDS Statement of Account	ent to the correspondence address indicated above. In the eve	nt of revocation of the
condolidated CDS Statement of Account, Bursa Depository will continue to utilise the above of	-	nt of Accounts unless the
correspondence address of the respective account is updated by the depositor using the Bursa	Depository prescribed form.	
TANDATANGAN PENDEPOSIT /PENANDATANGAN DIBERI KUASA * SIGNATURE OF DEPOSITOR/AUTHORISED SIGNATORY(IES) *	TAI DA	RIKH TE
* Lekatkan meterai rasmi syarikat atau cop rasmi syarikat (di mana perlu) Affix common seal or company r	ubber-stamp (where applicable)	
UNTUK KEGUNAAN PEJABAT SA	AHAJA FOR OFFICE USE ONLY	
Untuk diisi oleh ADA To be completed by ADA (Tandatangan dan lekatkan cop rasmi syarikat (Sign and affix company rubber-stamp)		
DISEMAKKAN OLEH VERIFIED BY	TARIKH :	
DILULUSKAN OLEH :	TARIKH :	
DATA DIMASUKKAN OLEH :	TARIKH :	

11/200

PERMO	HONAN MENDEPOSIT SEKURITI SECURITIES D	DEPOSIT REQUEST
E	BUTIR - BUTIR PENDEPOSIT PARTICULARS OF D	DEPOSITOR
NO. AKAUN CDS CDS ACCOUNT NO :		TARIKH DATE:
NAMA PENDEPOSIT DAN AKAUN KELAYAKAN NAME OF DEPOSITOR AND ACCOUNT QUALIFI		
	BUTIR - BUTIR SIJIL PARTICULARS OF CERTII	FICATE(S)
KOD SEKURITI SECURITIES CODE :	NAMA SEKURITI NAME OF SECURIT.	
NO. SIJIL DARI CERTIFICATE NO. FROM	HINGGA NO. SIJIL TO CERTIFICATE NO.	KUANTITI Q <i>UANTITY</i>
JUMLAH BILANGAN SIJIL : TOTAL NO. OF CERTIFICATE(S):	JUMLAH BILAI TOTAL NO. OF	
TANDATANGAN PENDEPOSIT/PENANDATANG. SIGNATURE OF DEPOSITOR/AUTHORISED SIGN		
	TUK KEGUNAAN PEJABAT SAHAJA FOR OFFIC	CE USE ONLY
Untuk diisi oleh ADA/ADM To be completed by All (Tandatangan dan lekatkan cop rasmi syarikat)		
TARIKH DITERIMA : DATE RECEIVED :	MASA: TIME:	
DISEMAK OLEH : VERIFIED BY :		TARIKH: DATE:
DILULUSKAN OLEH: APPROVED BY:		TARIKH: DATE:
DATA DIMASUKKAN OLEH : DATA ENTRY BY :		
NO. RUJUKAN DEPOSIT : [

FDE010

MORATORIUM SHARES DECLARATION

"Letterhead Of The Authorised Nominee"

To:
Bursa Malaysia Depository Sdn Bhd 6 th Floor, Exchange Square Bukit Kewangan 50200 Kuala Lumpur
MORATORIUM SHARES DECLARATION
<u>Depositor</u>
CDS Account Number :
Name of CDS Account Holder :
Company Registration Number :
Account Qualifier :
Name of Counter :
Certificate No.(s) :
I/We, the abovenamed Depositor, hereby :-
1. Request that moratorium shares held by me/us to be deposited to the abovementioned Depositor's CDS account in the manner as set out in the attached Securities Deposit Request form (FDE 010),
2. Declare that the deposit of the shares will not result in any change in the beneficial ownership of the said shares,
and
3. Undertake to ensure that there will be no change in the beneficial ownership of the said shares during the moratorium period and that there will be no sale, transfer or assignment of the moratorium shares without prior approval of the Securities Commission.
Signature(s) of Authorised Signatory/(ies)
Date : c.c. The Director – Issues & Investment Division, Securities Commission

		FER OF SECURITIES REQUEST		•
(Sila baca panduan di hala A. BUTIRAN PENDEPOSIT PARTICULARS OF DEPOSITOR	man sebelah borang inPlease read the in	B.	BUTIRAN SAKSI PARTICULARS	S OF WITNESS
NO. AKAUN CDS CDS ACCOUNT NO.:		NAMA <i>NAME</i>	:	
NAMA PENDEPOSIT DAN AKAUN KELAYAKAN (jika berkenaan) NAME OF DEPOSITOR AND ACCOUNT QUALIFIER (if applicable)		NO. KP / PASSPORT NRIC NO. / PASSPORT	:	
		ALAMAT ADDRESS	:	
	_		·	
	_			
	_	JAWATAN OCCUPATION		
Saya/Kami mengesahkan dan mengistiharkan bahawa pindahan ini adalah selaras dengan panduan yang dinyatakan di halaman sebelah borang ini dan penerangan yang dibuat di bawah perkara E adalah benar. IWe hereby aftim and declare that the transfer is in accordance with the directions stipulated in the reverse side of this form		SAWATAN GOOD ATTON		
and that the representation made under item E below is true.		TANDATANGAN SIGNATURE		
		TANDATANGAN SIGNATURE	· -	_
TANDATANGAN PENDEPOSIT / PENANDATANGAN DIBERI KUASA SIGNATURE OF DEPOSITOR / AUTHORISED SIGNATORIES	TARIKH DATE	TARIKH DATE	:	
C. BI	UTIRAN PENERIMA PARTICULARS	OF TRANSFEREE		
NO. AKAUN CDS CDS ACCOUNT NO:				
NAMA PENERIMA PINDAHAN DAN AKAUN KELAYAKAN (jika berkenaan) NAME OF TRANSFEREE AND ACCOUNT QUALIFIER (if applica	able)			
D. BUTIRAN SEKURITI PARTICU	LARS OF SECURITIES			UNTUK KEGUNAAN PEJABAT/FOR OFFICE USE
KOD SEKURITI SECURITIES CODE: NAMA SEKURITI NAME OF SECURITIES: KUANTITI QUANTITY:	KUANTITI DALAM PERKATAAN QUANTIT	'IN WORDS :		NO. RUJUKAN PINDAHAN TRANSFER REF. NO.
t				
2.				
3.				
4.				
5.				
		GORY AND APPROVED REASONS FOR TRAN	SFER	
Sila rujuk perkara 8 di halar (Sila pangkah ".	nan sebelah borang ini Please refer: X" dikotak yang berkenaan Please cr	o item 8 on the reverse side of this form oss "X" on the relevant box)		
Kategori Category A Tiada pertukaran pemilikan benefisial Kategori No change in beneficial ownership Category B Pertukaran pemilikan benef Change in beneficial owner.				
Sebab-sebab untuk kategori B sahaja: B1 Tawaran Pengamb		atkan Pihak Berkuasa Kerajaan B5		aran Bursa Depository terdahulu
Reasons for category B only:	I ranster involv	ng Government Authorities	Reasons with prior approval	
B2 Ahli keluarga Family member	B4 Gadaian/Sanda Pledge/Charge			
		*(App		n dalam surat kelulusan Bursa Depository) in Bursa Depository's approval letter) B5 only)
UNTUK I Untuk diisi oleh ADA <i>To be completed by ADA</i>	KEGUNAAN PEJABAT SAHAJA FO	R OFFICE USE ONLY		
Untuk disi oleh ADA 10 be completed by ADA (Tandatangan dan lekatkan cop rasmi syarikat Sign and affix company rubber-stamp)				
TARIKH TERIMA DATE RECEIVED :		MASA TIME :		
DISEMAK OLEH VERIFIED BY		TARIKH DATE :		
DATA DIMASUKKAN OLEH (Peringkat ke 1) DATA ENTRY BY (1st Level)		TARIKH DATE :		
DILULUSKAN OLEH (Peringkat ke 2) APPROVED BY (2nd Level) :		TARIKH DATE :		

NOTA PENTING: SILA BACA ARAHAN DI HALAMAN SEBALIK SEBELUM MELENGKAPKAN BORANG INI. IMPORTANT NOTE: PLEASE READ THE INSTRUCTIONS OVERLEAF BEFORE COMPLETING THIS FORM.

APPROVED REASONS FOR TRANSFER

1. SUMMARY OF APPROVED REASONS FOR TRANSFER

Category A: No Change in Beneficial Ownership ("NCBO")

Reason Code	Reason	Remarks
Α	- Not Applicable -	a) This category of transfer would not result in change in Beneficial Owner.
		b) No prior approval from Bursa Depository is required to execute the transfer of securities.
		CLARIFICATION
		This category only applies to transfers of securities between securities accounts for the same BO. Such transfer transactions may takes place between the following securities accounts: -
		1.1. Direct securities accounts of the same BO;
		 Direct securities account of a BO or securities account of AN with a named BO into securities account of an AN with a named BO and vice versa;
		 Securities account of a BO or securities account of AN with a name BO into securities account of ar Exempt AN and vice versa;
		1.4. Securities accounts of the same Exempt AN; and
		1.5. Securities accounts of different Exempt AN.
		SUPPORTING DOCUMENTS
		2. Supporting documents are not required where: -
		 the name of the BO is transparent and identical in both the securities accounts of the transferor a transferee; and/or
		2.2. both the transferor and transferee are Exempt AN.
		3. In all other cases, supporting documents are required. Please refer to the following:
		3.1. the name of the BO is not transparent or identical in both securities accounts of the transferor and transferee.
		3.2 transfers of securities into or from a securities account of an Exempt AN with securities account of a E or an AN.

Category B: Change in Beneficial Ownership

Reason Code	Reason		Remarks	
B1	Take-Over Offer	a) This category of transfer would result in change in Beneficial Owner.		
		b) No prior approval from Bursa Depository is	required to execute the transfer of securities.	
		CLARIFICATION		
		This reason allows for the transfers of shares for the purposes of effecting take-over offers and matters relating to the same pursuant to the provisions in Part IV, Division 2 of the SCA.		
		SUPPORTING DOCUMENTS		
			ocuments which forms part of the document ("Offer Document") ("Offeror"), evidencing acceptance by a relevant shareholder of	
B2	Family Member	a.) This category of transfer would result in chan	ge in Beneficial Owner.	
		b.) No prior approval from Bursa Depository is r	required to execute the transfer of securities.	
		CLARIFICATION		
		1. This reason allows for transfers of securities between securities accounts where the BOs (who are individuals) are related to each other in the manner described below.		
		Note: This approved reason does not apply to depositors who are corporate bodies.		
		SUPPORTING DOCUMENTS		
		Parents	Brothers / Sisters	
		Birth Certificate or adoption papers. Children	Birth Certificates or adoption papers for both transferor and transferee having the same father and or mother	
		Birth Certificate or adoption papers.	Grandparents/Grandchild Birth certificates to prove the relationship.	
		Spouse		
		Marriage Certificate or "surat nikah".		
			ents are genuinely not available (for reasons acceptable to accept/approve such other supporting documents it deems fit.	

Reason Code	Reason	Remarks	
В3	Transfer involving	a.) This category of transfer would result in change in Beneficial Owner.	
	Government Authorities	B.) No prior approval from Bursa Depository is required to execute the transfer of securities.	
		CLARIFICATION	
		1. This reason allows for transfers of securities into or from securities accounts of any of the following government authorities or government related bodies:	
		 Minister of Finance; Minister of Finance Incorporated; Khazanah Nasional Berhad; Accountant General; and Registrar of Unclaimed Moneys. 	
		SUPPORTING DOCUMENTS	
		No supporting documents are required.	
В4	Pledge or Charge	a.) This category of transfer would result in change in Beneficial Owner.	
		b.) No prior approval from Bursa Depository is required to execute the transfer of securities.	
		CLARIFICATION	
		 This reason allows for transfers of securities between securities accounts for the purpose of: - Delivering pledged securities that are intended for force-selling in the direct securities account of the lending institution; PO/FI acquiring its clients' collateral to set-off its defaulted clients' credit facilities; and Transfers of securities between securities accounts of depositors for the purpose of a pledge or a charge of securities executed by a pledgor or a chargor in favour of a pledgee or a chargee which result in change in beneficial ownership (arising from loan transactions). 	
		Reminder: Disposal of pledged securities that are intended for force-selling must be executed via on market transactions or Direct Business Transactions (" DBT ").	
		SUPPORTING DOCUMENTS	
		No supporting documents required.	

Reason Code	Reason	Remarks
В5	Reasons with prior approval of	a) This category of transfer would result in change in BO.
	Bursa Depository	b) Prior written approval from Bursa Depository is required before the transfers of securities are executed.
		CLARIFICATION
		 This reason allows for transfers of securities between securities accounts of depositors arising from the following circumstances:-
		1.1. Corporate Activities;
		1.2. Death, bankruptcy, winding-up or de-registration of a depositor;
		1.3. Pursuant to the provisions of any written law or order of courts of competent jurisdiction;
		1.4. Rectification of errors permitted by Bursa Depository; and
		1.5. Others (Please refer to your Authorised Depository Agent for further information)
		2. The applicant i.e. transferor/transferee or its legal representative is required to obtain prior approval from Bursa Depository for the execution of the transfer of securities. The application for approval must provide details on the transfer requested as per the Application form for B5 transfers and the relevant documents evidencing any one of the circumstances under item 1.1 to 1.5.
		SUPPORTING DOCUMENTS
		3. Letter of approval issued by Bursa Depository to the applicant ("Bursa Depository's Approval Letter").
		4. <u>Note</u> :
		4.1. Upon obtaining Bursa Depository's approval for the transfer, the applicant (excluding ADA/ADM and its locally incorporated wholly owned nominee companies) is required to lodge the transfer form together with Bursa Depository's Approval Letter to the relevant ADA for execution of the transfer.
		With respect to transfers of securities from the ADAs/ADMs principal and/or nominees accounts (as defined in the Rules of Bursa Depository), the relevant ADAs/ADMs are required to enter into CDS, the approval reference number stated in the Bursa Depository's Approval Letter when executing the transfer.

Please refer to your Authorised Depository Agent / Authorised Direct Membet for further information on the above "Approved Reasons for Transfer".

2. **DIRECTIONS**

The following directions shall apply in the reading of the Approved Reasons for Transfer ("ART").

2.1 **PRINCIPLES**

- 2.1.1 The ART is a direction issued by Bursa Depository Sdn. Bhd ("Bursa Depository") as defined under section 9 of the Securities Industry (Central Depositories) Act 1991 ("SICDA").
- 2.1.2 The examples cited in the ART are not intended to restrict or limit the interpretation or the application of the ART.
- 2.1.3. The enumeration of the supporting documents requested to be submitted in the ART does not in any way restrict Bursa Depository powers in requesting for further documents in circumstances it deems fit.
- 2.1.4. Where the clarification given for a particular 'Reason Code' in the ART relates to a specific Act of Parliament (law made by the Parliament of Malaysia), the words and expressions used therein shall bear the meaning as defined in that Act (unless otherwise specified).
- 2.1.5 All questions relating to the interpretation and construction of the ART shall be referred to and decided by Bursa Depository.

2.2 DEFINITIONS OF WORDS AND EXPRESSIONS

2.2.1 In this ART unless the context otherwise requires-

"exempt authorised nominee" means an authorised nominee that is exempted by an order of the Minister under section 62A of the SICDA from the provisions of subsection 25A(1) of the SICDA.

"contract note" means a contract for the sale or purchase transactions of securities entered into on a stock market of a stock exchange.

2.2.2 The following words and expressions shall have the meaning assigned to them respectively under section 2(1) of the SICDA:

"authorised nominee" "securities account"

"beneficial owner" "securities"

"depositor" "stock exchange"
"issuer" "stock market"

"participating organisation"

2.3 ABBREVIATIONS

ADA	Authorised Depository Agent	Exempt AN	Exempt Authorised Nominee
ADM	Authorised Direct Member	Bursa Depository	Bursa Malaysia Depository Sdn. Bhd.
AN	Authorised Nominee	sc	Securities Commission
ВО	Beneficial Owner	SCA	Securities Commission Act 1993
CA	Companies Act 1965	SIA	Securities Industry Act 1983

FWT010			
SECURITIES WITHDRAWAL REQUEST			
PARTICULARS OF SECU	JRITY		
DATE:			
SECURITY CODE :	SECURITY NAME:		
QUANTITY: CERTIFICATE OPTION: (1-Single 2-Marketable)	QUANTITY IN WORDS:		
REGISTERED INTO NAME OF THIRD PARTY: YES NO			
(Tick whichever applicable) PARTICULARS OF DEPOSITOR	PARTICULARS OF WITNESS		
CDS ACCOUNT NO:	NAME :		
	NRIC/PASSPORT :		
NRIC/PASSPORT NO/REG. NO:	ADDRESS :		
NAME OF DEPOSITOR			
	OCCUPATION :		
	SIGNATURE :		
GBLATURE OF DEDOCATOR A LITHORISED SIGNATIONIES			
SINATURE OF DEPOSITOR/AUTHORISED SIGNATORIES (Delete whichever applicable)	DATE :		
PARTICULARS OF THIRE			
COMPLETE THIS PART IF THE SECURITY IS TO BE REGISTERED INTO THE NAME OF THIRD PARTY:	AME OF A THIRD PARTY		
NRIC/PASSPORT NO/REG NO :			
ADRESS:			
FOR OFFICE USE ONI	LY		
To be completed by ADA	To be completed by Bursa Depository		
(Sign and affix company's rubber stamp)	RECEIVED ON :		
DATE RECEIVED :TIME : VERIFIED BY :	CHECKED BY :		
(Authorised Signatory)			
DATA ENTRY BY : DATE :	APPROVED BY		
DATE :	SENT TO REGISTRAR ON :		
WITHDRAWAL REFERENCE NO:			

N	NOTIFICATION OF I	DEATH OF DEPOSITOR	
CDS ACCOUNT NO. NAME OF DECEASED DEPOSITOR : NRIC/PASSPORT NO. : ADDRESS :			
Please cross (X) where applicable *Probate/Letters of Administration *was. The securities enumerated below *was/	· ·	uant to a distribution order dated	
NAME	NRIC NO.	ADDRESS	TEL. NO.
Name :	itory Sdn Bhd ("Bursa Deposite	CDS A/C N-	
*I/We hereby:- 1) declare that the *Probate/Letters of Admi and/or annulled at any point of time, imm *Probate/Letters of Administrations/distr 2) agree and undertake to indemnify and ke	inistrations/distribution order gradiately prior to and at the time ibution order to Bursa Deposito indemnified Bursa Deposito any be brought arising out of/or	ry against all claims, demands, proceedings legal or in relation to and/or in respect of the transfer of de	idated otherwise, expenses,
NAME	3	SIGNATURE	DATE
* Please delete whichever that is not applicable	FOR OFF	FICE USE ONLY	
CLEARANCE BY FINANCE :		DATE :	
CHECKED/VERIFIED BY : APPROVED BY :		DATE : DATE :	

FORM A

Date: DD/MM/YYYY
To: Authorised Nominee
Dear Sirs
TRANSFER OF SECURITIES DIRECTLY TO BENEFICIARY(IES) ESTATE OF (NAME OF DECEASED)
We refer to the above matter.
Please transfer (*all securities / name specific securities) held in the following securities account:-
Name of Account holder: CDS Account No.:
to the following person(s):-
Name of Account holder: NRIC No.: CDS Account No.:
Yours faithfully
$SIGNATURE(S) \ OF \ EXECUTOR(S)/ADMINISTRATOR(S)$
DECLARATION BY WITNESS
I hereby affirm and attest that the signature(s) of the above-mentioned executor(s)/administrator(s) belong to the said executor(s)/administrator(s) who have so appeared in person before me.
Name: NRIC No.: Licence No.: Designation: Signature: Date:

(*delete whichever is not correct)

FORM I	3					
	NOTIFICA	TION OF	BANKRU	PTCY O	F DEPOSITOR FOR	M
NAME ADDRES	: <u> </u>					
NRIC/PA	SSPORT NO. :					
SECURIT TELEPHO	IES A/C NO. :	-		-		
	renamed person was adjudicated ficial Assignee in this matter.	a bankrupt by o	order of the court	dated	and *I/we have been	n appointed
	Name	NRIC N	o/Co Reg No		Address	Tel. No.
	reby request the Bursa Malaysia ies account(s) as follows:-	Depository Sd	n Bhd ("Bursa Do	epository") to	transfer the abovementioned dep	osited securities to
Name Securities				2) Name * Secur	e :	
* NRIC/Pas	sport No./Co Reg No. :			* NRIC	: C/Passport No./Co Reg No. :	
Telephone					hone No. :	
	Name of Securities in Full		Quantity		Name of Securities in Full	Quantity
3) Name				4) Name		
* Securities					ities A/C No.	
	sport No./Co Reg No. :				: C/Passport No./Co Reg No. :	
Telephone	: No. :			Telep	hone No. :	
	Name of Securities in Full		Quantity		Name of Securities in Full	Quantity
	o request Bursa Depository to close to are no securities standing to the		-		fter effecting the said transfers provid	ed
	N	AME			SIGNATURE	DATE
(i) (ii)						
(iii) (iv)						
	elete whichever that is not applicable					
	TO	BE COMP	LETED BY B	URSA DEI	POSITORY ONLY	
Date Rece Time Rece	· · · · · · · · · · · · · · · · · · ·					
Checked/V	Verified By :				Dec	
Approved	ву:				Date :	

FORM C			
NOTIFICA	TION OF WINDING	G-UP OF COMPANY FORM	, L
NAME OF WOUND-UP COMPANY :			
CO. REGISTRATION NO. :			
SECURITIES A/C NO. :]
The abovenamed body corporate was dissolute Official Receiver/Liquidator in this mat	-	and *I/we have been	appointed as
Name	NRIC No/Co Reg No	Address	Tel. No.
the securities account(s) as follows:- (1) Name/Co. : Securities A/C No. :	Depository Sdn Bhd ("Bursa Depo	(2) Name/Co. Securities A/C No. NRIC/Passport No./Co Reg No.:	osited securities to
Telephone No.		Telephone No. :	
Name of Securities in Full	Quantity	Name of Securities in Full	Quantity
Securities A/C No. : NRIC/Passport No./Co Reg No. :		(4) Name/Co. : Securities A/C No. : NRIC/Passport No./Co Reg No. : Telephone No. :	
Name of Securities in Full	Quantity	Name of Securities in Full	Quantity
*I/We also request Bursa Depository to close the provided that there are no securities standin		rporate's Securities Account after effecting the said ody corporate's securities account.	transfer(s)
NAM	E/CO	SIGNATURE	DATE
(i) (ii)			
(iii)			
(iv) *please delete whichever that is not applicable			
*	BE COMPLETED BY BU	RSA DEPOSITORY ONLY	_
Date Received :		<u></u>	
Checked/Verified By :		<u> </u>	
Approved By:		Date :	



BURSA MALAYSIA DEPOSITORY SDN BHD (165570 W)

BORANG eDIVIDEN	eDIVIDEND FORM			
BAHAGIAN A PART A				
NOMBOR AKAUN CDS CDS ACCOUNT NUMBER:				
NO. K/P LAMA/PASPORT/KAD KUASA/PENDAFTARAN OLD NRIC/PASSPORT/AUTHORITY CARD/REG. NO.:	NO. K/P BARU NEW NRIC NO.:			
NAMA PENDEDORIE MANE OF DEDORITOR				
NAMA PENDEPOSIT NAME OF DEPOSITOR:				
	 			
BAHAGIAN B PART B				
Sila pangkah (X) yang berkenaan / Please cross (X) where applicable				
PEMOHON BARU NEW APPLICANT PENGEN	NASKINIAN MAKLUMAT UPDATING OF INFORMATION			
Sila pangkah (X) di bawah, jika anda ingin menggabungkan semua bayaran dividen untuk semua akaun CD Please also cross (X) at the below box if you want to consolidate dividend payment for all your CDS accour				
	TALAN PENGGABUNGAN AKAUN BANK REVOCATION OF CONSOLIDATED BANK ACCOUNTS			
NO. TELEFON BIMBIT HANDPHONE NO.				
ALAMAT E-MEL E-MAIL ADDRESS (diperlukan untuk menerima notis elektronik required if you wish to receive en	ectronic notification)			
Saya/Kami memohon Bursa Malaysia Depository Sdn Bhd (Bursa Depository) untuk memasukkan semua ke dalam Akaun Bank saya/kami yang berikut:	layakan dividen/faedah saya/kami untuk saham saya/kami yang berada di dalam akaun CDS ini ke			
I/We request Bursa Malaysia Depository Sdn Bhd (Bursa Depository) to credit all my dividends/other cash to my/our Bank Account as follows:	enefits payable to me/us in relation to securities held in my/our above mentioned securities account,			
NAMA BANK:				
BANK NAME: NOMBOR AKAUN BANK:				
BANK ACCOUNT NO.: AKAUN BERSAMA YA TIDAK				
JOINT ACCOUNT LYES NO				
NOTA NOTES *Penggabungan akaun bank akan menyelaraskan semua bayaran dividen dalam semua akaun CDS anda ke *Consolitation of bank account will allow you to receive all dividends payments in solution to all your CDS				
**Sekiranya anda membatalkan penggabungan akaun bank anda, bayaran dividen akan terus dikreditkan ke	*Consolidation of bank account will allow you to receive all dividends payments in relation to all your CDS accounts under one common bank account as stated above. **Sekiranya anda membatalkan penggabungan akaun bank anda, bayaran dividen akan terus dikreditkan ke dalam akaun bank yang tersebut di atas kecuali pengemaskinian akaun bank bagi setiap akaun CDS			
telah dibuat melalui ADA dimana akaun CDS anda beroperasi. ** In the event of revocation of the consolidation of bank account, payment will be credited to the above ba accounts are maintained.	nk account unless the bank account number has been updated with the respective ADA where the CDS			
PERAKUAN OLEH PEMOHON/PENANDATANGAN DIBERI KUASA/PERWAKILAN	PERAKUAN WAKIL PENIAGA/PEGAWAI ADA DIBERI KUASA/NOTARI AWAM/LAIN-			
MELALUI SURAT KUASA DECLARATION BY APPLICANT/AUTHORISED SIGNATORY(IES)/ATTORNEY(S)	LAIN YANG DILULUSKAN OLEH BURSA DEPOSITORY (untuk dilengkapkan apabila pemohon tidak menghadirkan diri di ADA untuk pemohon baru dan permohonan pengemaskinian akaun			
Saya/Kami dengan ini \(\textit{lWe hereby:} \)	bank nombor saja) DECLARATION BY DEALER'S REPRESENTATIVE/ADA'S AUTHORISED			
i. mengesahkan bahawa semua maklumat yang dinyatakan di dalam borang ini adalah benar sepertimana pada	OFFICER(S)/NOTARY PUBLIC/OTHERS AS APPROVED BY BURSA DEPOSITORY (To be completed when applicant is not present in person for new applicant and updating of bank account number only)			
tarikh borang ini ditandatangani. affirm that all the information stated in this form is correct as at the date of this form.	Saya dengan ini memperakui dan mengesahkan bahawa butir-butir pemohon telah disemak dan didapati			
ii. memberi kebenaran muklamad ("irrevocably consent") kepada Bursa Depository, syarikat yang disenaraikan dan agen-agen mereka untuk mendedahkan maklumat peribadi saya/kami kepada mana-mana pihak setakatmana	benar dan tandatangan/cap ibujari pemohon/penandatangan diberi kuasa/penwakilan melalui surat kuasa adalah kepunyaan pemohon/penandatangan diberi kuasa/perwakilan melalui surat kuasa yang			
yang diperlukan untuk melaksanakan ataupun untuk memudahkan, pembayaran kesemua dividen dan lain-lain agihan tunai yang layak saya/kami terima berkaitan dengan sekuriti yang didepositkan di dalam akaun sekuriti	menghadirkan diri dihadapan saya. I hereby affirm and attest that the particulars of the applicant have been verified to be true and the			
saya/kami, terus ke dalam akaun bank saya/kami seperti dinyatakan di dalam borang ini atau seperti pengemaskinian terkini dari masa ke semasa, atau untuk apa-apa tujuan berhubung dengan pembayaran dividen melalui cara tersebut.	signature(s)/thumbprint(s) of the applicant/authorised signatory(ies)/attorney(s) belong(s) to the applicant/authorised signatory(ies)/attorney(s) who has/have appeared in person before me.			
irrevocably consent to the disclosure by Bursa Depository, the issuer and their respective agents to any person, of such of my/our personal information as may be necessary or expedient to facilitate the payment of all cash				
dividends and other cash distributions that may be due to me/us in respect of the deposited securities in my/our securities account, directly into my/our bank account as stated in this form or as may be updated from time to	NAMA : NAME			
time, or for any other purpose in connection with the payment of dividends via such manner. iii. memberi kebenaran muktamad ("irrevocably consent") untuk menerima semua pembayaran dividen dan lain-lain	NO. KP :			
agihan tunai yang layak saya/kami terima berkaitan dengan sekuriti yang didepositkan di dalam akaun sekuriti saya/kami, secara kredit terus ke dalam akaun bank saya/kami seperti dinyatakan di dalam bank saya/kami seperti dinyatakan di dalam bank saya/kami seperti dinyatakan di dalam bang ini atau	NRIC NO.			
seperti pengemaskinian terkini dari masa ke semasa. irrevocably consent to receiving all cash dividends and other cash distributions that may be due to me/us in	NO LESEN (jika perlu) : LICENCE NO. (if applicable)			
respect of the deposited securities in my/our securities account via direct credit into my/our bank account as stated in this form or as may be updated from time to time.	JAWATAN : DESIGNATION			
iv. memberi kebenaran muklamad ("irrevocably consent") untuk menerima notis elektronik yang berkaitan dengan pembayaran dividen atau lain-lain agihan tunai yang dibayar terus ke dalam akaun bank saya/kami, melalui				
butiran untuk menghubungi saya/kami yang dinyatakan di dalam borang ini atau seperti pengemaskinian terkini dari masa ke semasa.	TANDATANGAN :			
irrevocably consent to receiving electronic notifications in connection with cash dividends and other cash distributions being directly paid into my/our bank account, sent using my/our contact details as stated in this form or as may be updated from time to time.				
or as may be updated from time to time.	TARIKH : DATE			
	INITIAL MEGALINA AND RELIABATION IN THE CORRECT MORE ONLY			
	UNTUK KEGUNAAN PEJABAT SAHAJA FOR OFFICE USE ONLY			
	Untuk diisi oleh ADA To be completed by ADA (Tandatangan dan lekatkan cop rasmi syarikat) (Sign and affix company rubber-stamp)			
	Untuk diisi oleh ADA To be completed by ADA			
	Untuk diisi oleh ADA <i>To be completed by ADA</i> (Tandatangan dan lekatkan cop rasmi syarikat) (Sign and affix company rubber-stamp) DISEMAK OLEH : TARIKH :			
	Untuk diisi oleh ADA To be completed by ADA (Tandatangan dan lekatkan cop rasmi syarikat) (Sign and affix company rubber-stamp)			
TANDATANGAN PENDEPOSIT / PENANDATANGAN DIBERI KUASA* TARIKH SIGNATURE OF DEPOSITOR/AUTHORISED SIGNATORY(IES)* DATE	Untuk diisi oleh ADA <i>To be completed by ADA</i> (Tandatangan dan lekatkan cop rasmi syarikat) (Sign and affix company rubber-stamp) DISEMAK OLEH : TARIKH :			
TANDATANGAN PENDEPOSIT / PENANDATANGAN DIBERI KUASA* TARIKH SIGNATURE OF DEPOSITOR/AUTHORISED SIGNATORY(IES)* DATE **Lekalkan meteral rasmi syarikat alau cop rasmi syarikat (di mana perlu) **Affix common seal or company rubber-stamp (where applicable)	Untuk diisi oleh ADA To be completed by ADA (Tandatangan dan lekatkan cop rasmi syarikat) (Sign and affix company rubber-stamp) DISEMAK OLEH : TARIKH : DILULUSKAN OLEH : TARIKH :			