



RHB Investment Bank Berhad 19663-P

(A Participating Organisation of Bursa Malaysia Securities Berhad)

(A Trading Participant of Bursa Malaysia Derivatives Berhad)

Level 10, Tower One, RHB Centre, Jalan Tun Razak, 50400 Kuala Lumpur, Malaysia.

Tel : +603 9285 2233

Fax : +603 9284 7658

For Office Use Only

Client's CIF No.

Grid for Client's CIF No.

Spouse / Joint Applicant's CIF No.

Grid for Spouse / Joint Applicant's CIF No.

Date Updated

Grid for Date Updated

UPDATING OF CLIENT'S PARTICULARS

INSTRUCTIONS FOR COMPLETION OF APPLICATION FORM

- 1. Tick where applicable.
2. Certified true copy of supporting documents shall be submitted by clients when updating their particulars with RHB Investment Bank Bhd ("RHBIB")

CLIENT PARTICULARS (Compulsory)

Existing Name

(As per NRIC/Passport/Business Registration)

Grid for Existing Name

NRIC / Passport / Regist. No.

Grid for NRIC / Passport / Regist. No.

Old NRIC No.

Grid for Old NRIC No.

TYPE OF ACCOUNT (Please select the account(s) that require changes)

- Equities / CDS Trading Account
Margin Account
Derivatives Trading Account
Others, please specify:

Account Number

Grid for Account Number

INDIVIDUAL / CORPORATE DATA (Please fill in where necessary)

New Name

(As per NRIC/Passport/Business Registration)

Grid for New Name

New NRIC / Passport / Regist. No.

Grid for New NRIC / Passport / Regist. No.

Permanent / Registered Address

(As per NRIC / Business Registration)

Grid for Permanent / Registered Address

Postcode

Correspondence Address

(If different from above)

Grid for Correspondence Address

Postcode

Contact Details

Home No.

Grid for Home No.

Facsimile No.

Grid for Facsimile No.

Office No.

Grid for Office No.

Handphone

Grid for Handphone

Email Address

Grid for Email Address

Nature of Business

- Education, Financial Intermediation, Telecommunications, Manufacturing, Real Estate Activities, Construction, Hotel & Restaurant, Transportation, Others, please specify

Bank Account Details:

Bank Name

Grid for Bank Name

Account No.

Grid for Account No.

Account Name

Grid for Account Name

Account Type

Grid for Account Type

FOR INDIVIDUAL ONLY (Please fill in where necessary)

1. Personal Data

Salutation Datuk Dato' Datin Dr. Others, please specify _____

Nationality Malaysian Others: Country of Origin _____

Marital Status Married Divorced Widowed

Employment / Business Employed Own Business Others, please specify _____

Name of Employer / Company _____

Malaysian Permanent Resident (For foreigners only) Yes No

Designation _____ Years in Employment / Business _____

Address of Employer / Company _____

 _____ Postcode _____

Current Annual Income RM20,000 and Below RM20,001 – RM40,000 RM40,001 – RM60,000 RM60,001 – RM100,000
 RM100,001 – RM250,000 RM250,001 – RM500,000 RM500,001 – RM1,000,000 Above RM1,000,000

Estimated Net Worth RM50,000 and Below RM50,001 – RM100,000 RM100,001 – RM200,000 RM200,001 – RM500,000
 RM500,001 – RM1,000,000 RM1,000,001 – RM3,000,000 Above RM3,000,000

Source of Funds Employment Business Investment Returns Inheritance
 Others, please specify _____

2. Spouse / Joint Applicant Data

Relationship with Account Holder Spouse Joint Applicant, please specify relationship _____

Name _____
 (As per NRIC / Passport)

New NRIC / Passport No. _____ Old NRIC No. _____

Salutation Mr Ms Datuk Dato' Datin Dr
 Others, please specify _____

Nationality Malaysian Others: Country of Origin _____

Malaysian Permanent Resident (For foreigners only) Yes No

Employment / Business Employed Own Business Others, please specify _____

Name of Employer / Company _____

Designation _____ Years in Employment / Business _____

Address of Employer / Company _____

 _____ Postcode _____

Contact Details
 Home No. _____ - _____ Facsimile No. _____ - _____
 Office No. _____ - _____ Handphone _____ - _____
 Email Address _____

FOR CORPORATE ONLY (Please fill in where necessary)

Type of Organisation Sole Proprietor* Public Company Government / Government Link Agency / Company
 Partnership* Private Company Society / Association
 Others, please specify _____

Nature of Ownership Domestic Banking Institution (Commercial Banks / Islamic Banks / Investment Bank) Domestic Non-Bank Financial Institution
 Bumiputra Controlled SME (Micro / Small / Medium) Non-Bumiputra Controlled SME (Micro / Small / Medium)
 Government Controlled SME (Micro / Small / Medium) Government (Federal / State / Local / Statutory)
 Foreign Banking Institution Stockbroking Companies (Subsidiary / Associate / Other)
 Foreign Non-Bank Entities Others, please specify _____

*Only for Derivatives

DELIVERY OF CONTRACT NOTES / STATEMENTS / TRADE NOTIFICATIONS

Type of Products	Trade Notification ¹		Contract Notes / Statements (please tick one (1) only for each product)		
	SMS	Email	Email	Post ² (No. of Contract Notes ³)	
Equities Trading Account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____ copy(ies)
Margin Account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____ copy(ies)
Derivatives Trading Account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Other, please specify :					

Note:-

1. Subject to the availability of the facility.
2. Contract Notes / Statements will be sent to client's correspondence address.
3. Only one (1) copy for individual clients. Max. two (2) copies for corporate client.

DECLARATION

Declaration for Updating of Client's Particulars

I/We declare that all particulars and information given in this *Updating of Client's Particulars Form* are true and correct and that I/we have not withheld any material facts or information from RHBIB. RHBIB is entitled to fully rely on such information for all purposes, unless RHBIB receives notice in writing from me/us informing otherwise. I/We hereby undertake to furnish RHBIB with such additional particulars as RHBIB may require at any time and also undertake to inform RHBIB of any changes with regard to the particulars stated herein from time to time.

Declaration for Changes in Mode of Delivery

In consideration of you agreeing to my request for the issuance and delivery of contract notes/statements by way of electronic or online devices, and any other notices issued by you from time to time, I/we hereby accept and assume the risks associated with the transfer of documents/information by way of electronic or online devices and/or delivery, including delays or failure in the transmission due to breakdown or failure of transmission or traffic congestion of communications or any other cause(s) beyond your control or anticipation and/or inherent risks in receiving electronic contract notes/statements. I/We understand the risks involved in communication over the internet and/or electronic communication channel. I/We shall not dispute or challenge the validity, enforceability or admissibility of any such record and the contents therein. In the event of systems failure, I/we consent to receive the contract notes/statements via post or such other means as you deem fit and appropriate.

I/We also agree that this instruction shall be effective until revoked by me/us by giving you a newly executed form superseding this form. I/We also understand that you may cancel this email delivery service without providing any reason and/or prior notice to me/us.

I/We acknowledge that any contract notes/statements sent to me/us, whether by e-mail or by post, if sent to my/our address as given to you herein shall be deemed to be duly served on me/us within the applicable period provided for in the agreement after it is posted and/or if sent by e-mail, on the day such communication was made.

I/We shall assume all responsibility or liability whatsoever for any direct or consequential loss arising from or in connection with you acceding to my/our above request. I/We further agree to indemnify you and hold you harmless from and against all actions, proceedings, claims, demands, losses, damages, costs, penalties, fines, charges and expenses which you may sustain, incur and be liable to in consequence of or attributable to or arising from the above request.

Signature of Client (Individual) / Authorised Signatory (Corporate) :	_____	Signature of Joint Applicant: (If applicable) :	_____
Name of Client / Authorised Signatory :	_____	Name of Joint Applicant :	_____
NRIC / Passport No. of Authorised Signatory (Corporate) :	_____	Date :	_____
Designation of Authorised Signatory (Corporate) :	_____		
Date :	_____	Please affix corporation stamp (for Corporate Client) :	_____

FOR OFFICE USE ONLY

	Signature	Name	Designation	Date
Verified by (if applicable) :				
Approved by (if applicable) :				
Updated by :				
Checked by :				