

[illegible][illegible]

1. Form to be completed by the Appointed Authorized Person of the Company/Organization.

- Name of Person Covered:

- i. ☐ Form 8 - Certificate of Incorporation for Public Company or
Form 9 - Certificate of Incorporation for Private Company
- ii. ☐ Form 24 - Return of Allotment of Shares (Latest)
- iii. ☐ Form 49 - Return giving particulars in register of directors, managers and secretaries and changes of particulars (Latest)
- iv. ☐ Authorization letter from the Company or resolution from Board of Directors for the appointed Authorized Person
- v. ☐ Clear copy of NRIC / Passport of the Authorized Person

Note: "Beneficial Owner" of the Proposer refers to person(s) who ultimately owns or controls the Proposer and / or the person on whose behalf a business relation are established. It also includes a natural person who exercises ultimate effective control over the Proposer. "Ultimately owns or controls" or "ultimate effective control" refers to situation in which ownership or control is exercised through a chain of ownership or by means of control other than direct control.

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- [illegible]

- / /

Day Month Year

- [illegible]

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Day Month Year

Note: "Authorized Person" refers to natural person authorized by the Company to act on its behalf in establishing business relations with Great Eastern Takaful Berhad.

- [illegible]

- (c) Date of Birth:

- / /

Day Month Year

- (e) Passport Expiry Date

- Day / Month / Year

- [illegible]

- [illegible]

DECLARATION OF AUTHORIZED PERSON

I hereby confirm and represent to Great Eastern Takaful Berhad, its related corporations (collectively the "Takaful Operators"), as well as their respective representatives and agents ("Representatives") that each of the Beneficial Owners and Authorized Person have agreed and consented to the disclosure of their personal data to the Takaful Operators and their Representatives, and further, that for the Takaful Operators and Representatives' collection, use and / or disclosure of the personal data of the Beneficial Owners and Authorized Person, and disclosing such personal data to the Takaful Operators' authorized service providers and relevant third parties for purposes reasonably required by the Takaful Operators to evaluate our proposal and to provide the products or services which we are applying for.

I declare that the information I have given in this Questionnaire are true and accurate, and I have not withheld any material information.

Signature of Authorized Person with Designation
and Company Stamp

Date

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Day Month Year

**Please submit a clear copy of NRIC/Passport of the Authorized Person

STATEMENT OF WITNESS

I hereby certify that the signature in this form was made in my presence and that to my own personal knowledge it is the signature of the Authorized Person under the Certificate No. / Proposal No. as mentioned above.

Signature of Witness

Name

NRIC No.

Address

