



APPLICATION FOR OPENING OF TRADING ACCOUNT

INSTRUCTIONS FOR COMPLETION OF APPLICATION FORM

- 1) All information must be completed. Please type or write using BLOCK LETTERS.
- 2) Each box must contain only one letter. Leave one box between words.
- 3) Any amendment made must be legible and should be countersigned by the applicant.
- 4) Form that is incomplete, illegible or defaced in any way may result in the application being rejected.

FOR OFFICE USE ONLY	
Client Code:	Dealer:

PERSONAL DATA

Full Name of Applicant (as per NRIC/registration document)

\_\_\_\_\_

\_\_\_\_\_

Male

Female

NRIC (New) \_\_\_\_\_ Passport / NRIC (Old) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Nationality  Malaysian  Others (Please specify) \_\_\_\_\_  
Race \_\_\_\_\_

Present Home Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_

Correspondence Address (if differs from the above) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_

Contact No. Home \_\_\_\_\_ Handphone \_\_\_\_\_ E-mail \_\_\_\_\_

Marital Status  Single  Married  Others (Please specify) \_\_\_\_\_ No. of Dependents \_\_\_\_\_

Academic Qualifications \_\_\_\_\_

Mother's Name \_\_\_\_\_

EMPLOYMENT DATA

Employment Status  Under Employment  Self Employed  Others (Please specify) \_\_\_\_\_

Name of Employer/ Business \_\_\_\_\_

Office/Business Address \_\_\_\_\_  
\_\_\_\_\_ Telephone No. \_\_\_\_\_

Nature of Business \_\_\_\_\_

Type of Business  Public Company (Listed / Not Listed)  Private Company  Others (Please specify) \_\_\_\_\_

Position Held/ Occupation \_\_\_\_\_ Years in Employment/Business \_\_\_\_\_

Gross Annual Income  Below RM12,000  RM12,001 to RM24,000  RM24,001 to RM36,000  RM36,001 to RM48,000  
 RM48,001 to RM60,000  RM60,001 to RM100,000  RM100,001 to RM200,000  Above RM200,000

Other Income RM \_\_\_\_\_ Estimated Network RM \_\_\_\_\_

SPOUSE DATA

Name \_\_\_\_\_

NRIC (New) \_\_\_\_\_ Passport / NRIC (Old) \_\_\_\_\_

Employment Status  Under Employment  Self Employed  Others (Please specify) \_\_\_\_\_

## PARTICULARS OF CONNECTED PARTIES

Are you related to any staff / director / dealer or remisier of TA Futures Sdn. Bhd. If yes, please provide the following details:

Yes

No

Name

Designation

Relationship

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Related parties include spouse, partner, partnership, partner's spouse, and corporations over which you exercise control.

## INVESTMENT OBJECTIVE AND EXPERIENCE

Objective  Speculative  Hedging  Others (Please specify) \_\_\_\_\_

Investment Experience  Stocks & Shares : \_\_\_\_\_ Year(s)  Futures : \_\_\_\_\_ Year(s)

Call Warrants : \_\_\_\_\_ Year(s)  Other Derivatives : \_\_\_\_\_ Year(s)

Trading Account with other Brokers  Yes  No

Trading Account with TA Futures Sdn Bhd prior to this application  Yes. Account No. \_\_\_\_\_  No

## BANKING PARTICULARS

Bank

Branch

Account Number

Account Type

\_\_\_\_\_  Current  Savings/  
Fixed Deposit

\_\_\_\_\_  Current  Savings/  
Fixed Deposit

## EXCHANGE CONTROL DECLARATION (To be completed by Non-Malaysian)

DECLARATION BY NON MALAYSIAN CITIZEN

I DECLARE THAT I AM NON-RESIDENT OF MALAYSIA

I DECLARE THAT I AM PERMANENT RESIDENT OF \_\_\_\_\_ (COUNTRY)

## Signatures of Applicant (To be completed by Applicant)

I declare that the above information given is completed and true. I understand that any information withheld or false information subsequently discovered may lead to an immediate termination of the agreement and contract that I have with the Company.

Applicant's

Signature : .....

Date : .....

## DOCUMENTS TO BE SUBMITTED TOGETHER WITH THE APPLICANT FORM

A clear photocopy of:-

- i. NRIC/Driving Licence (if temporary NRIC is submitted) and a copy of the permanent NRIC when it has been obtained from the relevant authority.
- ii. Passport (for foreign applicant only)
- iii. Latest salary slip or latest Income Tax Form J

## AUTHORISATION

I hereby authorise and empower the following person(s) ("Representatives" which expression shall include their substitutes unless repugnant to the context):-

<u>Name</u>	<u>Identity No.</u>
1) _____	_____
2) _____	_____
3) _____	_____

to carry out the following functions in my name and on my behalf or otherwise in the name(s) if the abovenamed Representatives to do and execute either jointly or severally as and when the Representatives shall either jointly or severally deem fit:-

- To place orders with the Futures Broker Representatives for the purchase or sale of any futures and options contracts;
- To collect cheques and monies payable to me from you;
- To collect documents by me from you;
- To make payment for margin by me from you;
- To carry out all and any other matters (administrative or otherwise) relating to my trading activities with you;
- To substitute and appoint from time to time one or more other person(s) as my representative(s) with the same or less powers and such substitute(s) or appointee(s) at pleasure to remove and to re-appoint such other representatives.

In consideration of you acknowledging this Authorisation, I hereby agree to the following:-

- I shall not make any claims against you for all and any matters relating to this Authorisation.
- I declare that you shall not be held liable or responsible to me for any loss or damage however and whatsoever arising as result of any act, neglect, omission or negligence of the Representatives or any of them in their execution of their powers under this Authorisation.
- I shall at all times fully and effectively indemnify you and keep you fully and effectively indemnified against all actions, suits, proceedings, claim, demands, losses, charges, penalties, fees, fines, costs, and expenses whatsoever made, taken, brought, institute, imposed, suffered, incurred, prosecuted or payable in any way howsoever (including without limitation negligence, innocent or fraudulent, on your part or on the part of your agents, employees or servants) against or by you to any person arising out or incidental to this Authorisation.
- I declare that this Authorisation being given for valuable consideration shall be valid until written revocation is given by me to you duly acknowledged by you or any of your authorised officer and in any event communicated to you before the execution of the above in relation to my account.
- Failure or delay on your part to insist in any one or more instance(s) upon the performance of any provisions of this Authorisation shall not be construed as a waiver or relinquishment of any of your right to future performance of such provisions and my obligation in respect of such future performance shall continue in full force and effect.
- In the event that any one or more of the provision(s) contained in this Authorisation shall for any reason be held to be unenforceable, illegal or otherwise invalid in any respect under the law governing this Authorisation (being the law of Malaysia) or its performance, such unenforceability, illegality or invalidity shall not effect any other provisions of this Authorisation and this Authorisation shall then be construed as if such unenforceable, illegal or invalid provisions had never been contained herein.
- I shall ratify and confirm all and whatsoever the Representatives shall do in the premises by virtue of these present.

## CLIENT'S DECLARATION

I acknowledge that I have read and clearly understood the aforesaid covenants and undertakings and authorisation, and hereby agree to abide by all the covenants and undertakings therein stated and as may be amended from time to time governing such an account.

\_\_\_\_\_  
Applicant's Signature

Name :  
Identity No. :  
Date :

\_\_\_\_\_  
Witness's Signature (Futures Broker Representative)

Name :  
Identity No. :  
Date :

CLIENT EVALUATION (To be completed by Future's Broker Representative)

PART A : TRADING BEHAVIOUR

Speculative

Spread

Hedging

PART B : PAYMENT PATTERN (applicable to client with trading records)

Poor (Difficult to collect losses)

Normal (Pays for margins within time frame)

Slow (Waits till due date, pays only when necessary for losses)

Prompt (Pays margins on time, hardly overtrades)

PART C : ABILITY TO EVALUATE RISK

Poor

Above Average

Average

Excellent

PART D : RISK CAPACITY (actual losses client can absorb)

Below RM 25,000

RM251,000 – RM500,000

RM 25,001 – RM100,000

Above RM500,000

RM 100,001 – RM250,000

PART E : KNOWLEDGE OF TRADING RULES

Poor

Above Average

Average

Excellent

PART F : FUTURES BROKER'S REPRESENTATIVE DECLARATION

Duration I have known applicant \_\_\_\_\_ Years

How do I know applicant \_\_\_\_\_

Previous dealings with applicant \_\_\_\_\_

Other background information to justify recommendation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby submit this application to open a trading account with TA Futures Sdn Bhd and request you to approve this application and allow me to act as the Futures Broker Representative for the said applicant. As a Futures Broker Representative of TA Futures Sdn Bhd, I hereby confirm that all information given herewith by the said applicant is true and correct to the best of my knowledge. I further confirm that the applicant is known to me personally.

I shall keep you fully indemnified against any losses, damages, debts, interests, charges, and all other costs and expenses incurred or suffered by you in relation to the trading account of the abovementioned applicant. I further declare that I have distinctly, clearly and audibly interpreted the covenants and undertakings in the \_\_\_\_\_ language/dialect to the applicant who seemed clearly to understand the said covenants and undertakings.

Signature and Date \_\_\_\_\_

Futures Broker Representative Code \_\_\_\_\_

Name \_\_\_\_\_

NRIC No. \_\_\_\_\_

(To be completed by Futures Broker Representative)

TA FUTURES SDN BHD

Date : .....

Dear Sirs,

Re: COMMISSION RATES FOR CLIENT

Kindly charge the client for the following commissions rates:

	Overnight	Spread	Day
FKLI	<input type="text"/> Per trade	<input type="text"/> Per trade	<input type="text"/> Per trade
FCPO	<input type="text"/> Per trade	<input type="text"/> Per trade	<input type="text"/> Per trade
FPKO	<input type="text"/> Per trade	<input type="text"/> Per trade	<input type="text"/> Per trade
Others	<input type="text"/> Per trade	<input type="text"/> Per trade	<input type="text"/> Per trade

Signature of  
Future Brokers  
Representative : .....

(To be completed by OPS)

Initial Deposit : .....

Recommended  Not Recommended

Recommended  Not Recommended

Signature (1) : .....

Signature (2) : .....

Name : .....

Name : .....

Date : .....

Date : .....

(To be completed by Approving Authority)

Trading Limit : [ ] Intraday [ ] Overnight for every unit margin deposited

Approved  Rejected

Signature : .....

Date : .....

(To be completed by OPS)

Client Code :   Trading System

Clearing System

Back Office System

FBR Code :

Remarks : .....

Updated by : ..... Checked by : .....

Name : ..... Name : .....

Date : ..... Date : .....

## ACCOUNT OPENING FORM CHECKLIST

FOR OFFICE USE ONLY

Items	Yes	No	Remarks
1 Check That The Opening Of The Clients Account Prior To Trading Is Signed & Approved By The Credit Committee.			
2 Check That The Compliance Officer Has Reviewed The Approval As Required By The MDEX Business Rule.			
3 Check That The Client Has Signed And Dated The Client Information Statement And Witnessed By A Licensed FBR.			
4 Check That The Client Had Filled Up The Client Information Statement eg:			
a) IC or Passport Number.			
b) Residential & Business Address.			
c) House & Phone Contact Number.			
d) Bank Account Name And Number.			
e) Does The Client Have A Securities Trading Account.			
f) Clients Understand Futures Trading.			
g) Clients Understand Risk Of Loss.			
5 Clients Understand The Possibility Of Incurring A Deficit Balance.			
6 If The Client Does Not Give The Order, Check That The Client Has Filled Up The Person Whom He Authorised To Act On His Behalf.			
7 Check That The Designated Representative Authorised By The Client Is Not Acting On Behalf Of Other Clients.			
8 Check That The Client Has Dated and Signed Two Copies Of The Client Agreement.			
9 Check That The Client Has Written Down His/Her Name And IC Number On The Client Agreement.			
10 Check That The Two Copies Of Client Agreement Has Been Signed By The ED and Witnessed By TAF.			
11 Has The Client Signed On The Risk Disclosure Statement To Indicate That He/She Has Received And Understood The Risk Associated With Trading Futures & Options.			
12 Check that the client had duly signed & filled up the employment details eg:			
a) Name Of Employer			
b) Designation			
c) Business Address			
d) Annual Income			
13 Check That The Client Had Indicated His Investment Objectives In Trading Futures & Options Contract.			
14 Check That The Client's IC Has Been Attached To The Client Information Statement.			
15 Check Whether Any Position Limit Is Imposed On The Client Trading Account.			
16 For Employees And Directors Who Are Allowed To Trade, Check To Ensure The Following :			
a) Prior Written Consent By The Board Of Directors Is obtained.			
b) The Exchange Is Informed In Writing That Such Consent Is Given.			
c) The Consent From Board Of Directors Is Attached To The Client Agreement.			
17 Verification of Client's Identity and contact details			Designated staff/ Caller : Time & Date :

Checked By : \_\_\_\_\_

Date : \_\_\_\_\_

Reviewed By : \_\_\_\_\_

Date : \_\_\_\_\_