CIMB SME BUSINESSCARD APPLICATION FORM

		IB SME BusinessCard Terms and Condit erms and conditions, you may clarify wit					
REQUIREMENTS • Corpo • For pu	ee must be of minimum age 21 years or ration must be established in Malaysia rposes of this Application, the term "C rship, limited liability partnership and	for more than 2 years Corporation" means any private limited co	mpany, sole proprietorship,				
Documents Required (non-returnal	ble) :						
Private Limited Company □ NRIC copy(ies) of Cardholder(s), Di □ M & A or Constitution *	rectors, Guarantor(s) *	Sole Proprietorship / Partnership / Limited Liability Partnership NRIC copy(ies) of Cardholder(s), Sole Proprietorship, All Partners * Photocopy of Business Registration Certificate * 					
Latest 6 Months' Bank Statements	(if applicable) *	Photocopy of Business License & Certi	ification of Renewal Document *				
□ Board Resolution / Extract of Board	d Resolution **	Latest 6 Months' Bank Statements (if a	applicable) *				
Memorandum of Continuing Guar	antee & Indemnity	Resolution / Mandate **					
		Memorandum of Continuing Guarant	ee & Indemnity				
* Original-sighted by Relationship Manage ** Original Certified-True-Copy by Compan	_	Initial by Relationship Manager:					
CORPORATE INFORMATION							
Registered Name	Not exceeding 18 letters)	Registration Number (Old) Registration Number (New)	Registration Date Total Annual Sales Turnover^ RM				
		Nature of Business	Number of Full Time Employees				
Registered Address							
		Total Card Limit Required					
Postcode	City	Expected Transactions per Month	I				
State	Country						
Office Number	Fax Number	Business Website (URL) Mandator	y for Online Business				
Business Mailing Address		Business Email Address (if available	2)				
Postcode	City	Group Name - If the company is a s company listed on the Main Board MKDs / State owned enterprises ³ , p	/ Large Firms / MNCs / GLCs /				
State Country							

Type of Entity (Please √ one)

- □ Private Limited Company
- □ Sole Proprietorship
- □ Partnership
- Limited Liability Partnership
- □ Others (please specify)

Current Business Premises (Please √ one)

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- □ Owned
- □ Mortgaged
- □ Rented

Residency Status (Please √ one)

- Resident Controlled
 - Bumiputera Controlled
 - □ Non-Bumiputera Controlled
- □ Non-Resident Controlled
- □ Government Controlled
 - Federal/Central Government
- Financial Public Enterprise
- Non-Financial Public Enterprise
- Other Government Controlled
- Non-Resident

^inclusive other income

- ³ Subsidiary of a Public Listed company listed on the Main Board means Legal entity that is owned by a public listed company.
- Main Board refers to company which is listed in the Main Board of Bursa Malaysia or any other main Bourse in other countries.
- Large Firms refers to companies with sales turnover more than RM50 million and more than 200 full-time employees.
- Multi National Companies ("MNCs") refer to corporations that own or have business activities in different countries.
- Government Linked Companies ("GLCs") refer to companies in which the Malaysian Government has a direct controlling stake.
- Menteri Kewangan Diperbadankan ("MKDs") refers to a corporate body established under the Minister of Finance (Incorporation) Act 1957.
- State-owned enterprises refer to legal entities that are partially or wholly owned by the Government.

AUTHORISED SIGNATORY / CARD PROGRAM ADMINISTRATOR

Salutation (Please √ one)

	lr	□ Mrs		🗆 Mis	S	□ Ot	hers	plea	se sp	pecify		 		 				
Name	e (as per	NRIC / I	Passpor	t)							_	Mobile	Number			 		
												Position	1			 		
NRIC	/ Passpo	ort Numl	ber									Email A	ddress			 		

DECLARATION SECTION

- 1. I / We acknowledge that the product disclosure sheet of CIMB SME BusinessCard ("Card") has been made available to me/us and the key contract terms affecting my/our obligations have been adequately explained to me/us by a staff, representative or agent of CIMB Bank Berhad ("the Bank").
- 2. I / We confirm that I / we have read and understood the Terms and Conditions of the card (which is available at the Bank's website at www.cimb.com.my) and the product disclosure sheet and I agree to be bound by the same.
- 3. If my / our application is approved, the Bank may issue the Card in the name of my / our business entity and my / our nominees.
- 4. I / We confirm that all information provided by me / us in this application form are true, accurate and complete and I / we will inform the Bank of any changes thereto.
- 5. I / We confirm that I / we have not committed any act of bankruptcy and / or been adjudged a bankrupt and / or wound up.
- 6. I / We understand that this application shall be subject to the Bank performing the necessary verification and the Bank may at its discretion approve or reject this application.
- 7. I/We authorise and consent to the Bank disclosing information relating to my / our affairs to:
 - (a) agencies including credit reference reporting agencies or governmental agencies or financial institutions for the purpose of conducting searches or credit reference checks on me / us or any of my / our directors, shareholders, officers or any other person, individual or entity related to and or associated with me / us ("**Reference Checks**"); and

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- (b) any related corporations of the Bank (collectively, "CIMB Group"), the Bank's and CIMB Group's agents, service providers, auditors, legal counsels, professional advisors or any security providers or guarantors in or outside Malaysia, for the purpose of this application or for the business, operations, financing and / or services of the Bank.
- 8. I/We have obtained the consent of my/our directors, shareholders, officers or any individual ("the Relevant Person") and has notified the Relevant Person:
 - (a) of the provision of his / her personal data for processing pursuant to the Personal Data Protection Act, 2010 for the purpose in paragraph 6 above;
 - (b) that Reference Checks may be conducted on the Relevant Person;
 - (c) of the disclosure of the Relevant Person's personal data to the classes of parties described in the CIMB Group Privacy Notice (which is available at www.cimb.com.my); and undertake to update the Bank in writing should there be any changes to the personal data of any of the Relevant Person and any revocation of such consent.
- I / We understand that information relating to my / our affairs may be disclosed to CIMB Group for cross-selling and other purposes of the Bank and / or the CIMB Group provided always that disclosure for cross-selling purposes shall not be effected if such disclosure is objected by me / us by contacting the Bank at: 17th Floor, Menara CIMB, No.1, Jalan Stesen Sentral 2, Kuala Lumpur Sentral, 50470 Kuala Lumpur. Telephone Number 1 300 888 828.
- 10. Where required by domestic or overseas governmental, supervisory or regulatory authorities, I / we also understand and agree that the Bank may be required to obtain additional documents and / or forms, which I / we will sign, if I / we am subject to the relevant jurisdiction's requirements.
- 11. Where required by domestic or overseas governmental, supervisory or regulatory authorities, I / we understand and agree that the Bank may withhold, and pay out, from any of my / our account(s) such amounts as may be required according to applicable laws, regulations, directives, guidelines and / or agreements with and / or from domestic or overseas governmental, supervisory or regulatory authorities.
- 12. In connection with Bank Negara Guidelines on Credit Transactions and Exposures with Connected Parties, I / we ____
- (Name of Applicant Company / Firm / Partnership) comprising of directors / partners etc. as per name list and NRIC nos. attached declare as follows: -
 - (a) I / We am / are / am not / are not a connected party of the CIMB Group¹
 - (b) I / We am / are connected to the CIMB Group as follows: -

	I / We am / are a controlling sh	areholder of the C	IMB Group and L/w	e control the sar	ne in the following man	or:	where appropriate					
	(a) I / We control more than		· · · · · ·	ve control the sal								
	(b) I / We hold more than 50		•	directly or indired	ctly (excluding preference	e shares):						
(i)	(c) I / We control the compo											
(.,	(d) I / We have the power to			rity of the board	of directors:							
	(e) I / We control the control		,	•	,							
	(f) the director of the CIMB (Group or its holdin	g company is accust	comed to act in a	ccordance with my / our	directions						
(ii)	(ii) I / We control or am/are controlled by a director ² , controlling shareholder, executive officer ³ or officer ⁴ (including their close relatives ⁵) of the CIMB Group ("the Connected Persons").											
	The Connected Persons or any o	one of them is inter	rested or connected	to me / us as a dii	rector, partner, executive	e officer, agent or guarantor						
(iii)	and I / we do have subsidiary (id	, , ,,	,	• •		sidiary(ies) or company(ies)						
(111)	which is or are controlled by m	e / us are as follow	vs [please complete	where applicable	e]:							
(iv)												
(v)	(v) I / We am/are controlled by or we are a subsidiary of the CIMB Group and its connected parties.											
(vi) 1 / We hold 20% or more interest shares of CIMB Group or have the power to appoint at least one person to the board of directors.												
[To be completed by the applicant Company / Firm / Partnership only where applicable :bup partner(s)/ sole proprietor of the applicant Company/Partnership/Firm (above person(s) do have close relatives ⁵ who is/are staff of the CIMB Group) and							being director(s)/					
	h are as follows:)	icant company/Pa			lave close relatives who		up) and particulars of					
No.	,	Name and NRIC / I	Passport Number of	the staff in the C	IMB Group person(s)		Nature of					
							Relationship of the					
							staff with the above					
1.							above					
2.												
3.												
4.												
5												
List (of all Shareholders & Directors / P	arthors / Ronoficia	0 Ownors									
		arthers / Beneficia										
No.	Full Name	Designation (i.e. Director,	NRIC / Passport Number	Percentage of	Nationality/ Country	Tax identification Number (if Nationality /	Contact Number					
		Partner,	Number	Ownership ⁶ /	of Incorporation/	Country of Incorporation						
			1	/ 4			I					
		Proprietor				in US or US Territory ⁷)						
1.		Proprietor				in US or US Territory ⁷)						
1. 2.		Proprietor				in US or US Territory ⁷)						

EIMB BANK				CONFID	DENTIAL	
4.						
5.						

- ¹ CIMB Group means CIMB Bank Berhad or CIMB Islamic Bank Berhad or CIMB Investment Bank Berhad or other subsidiaries or companies controlled by the aforesaid respective banking institutions.
- ² Director means director of the CIMB Group whether as an executive director or otherwise, and whether or not receiving compensation, and his close relatives. This includes alternate directors where permitted by the CIMB Group.
- ³ An executive officer is defined as a person who is member of management having authority and responsibility for planning, directing and / or controlling the activities of the CIMB Group (other than in the capacity as a director), whether or not the officer has an official title, or is entitled to salary or other compensation. Example of such officers include, but are not limited to, the chief executive officer, chief operating officer or member of business and policy-making committees.
- ⁴ Officer is defined as a person who is responsible for or has the authority to appraise and / or approve credit transactions or review the status of existing credit transactions, either as a member of a committee (e.g. Credit or Investment Committee) or individually, and his close relatives.
- ⁵ Close relative means those family members who may be expected to influence or be influenced by that individual, as well as dependents of the individual. This includes the individual's: (i) spouse and dependents of the spouse; (ii) child (including step children and adopted children) and spouse of the child; (iii) parent; and (iv) brother or sister and their spouses.
- ⁶To fill up "Director" if the person named is a Director of the applicant.
- ⁷ American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, the Commonwealth of Puerto Rico, or the U.S. Virgin Islands.

CIMB SME BUSINESSCARD NOMINATION FORM

REQUIREMENTS	A photoc	must be of mir opy of NRIC (bo opy of Visa for I	oth sides) or P	assport for No	n-Malaysian Nominee			
NOMINEE PERSONAL	DETAILS							
Salutation (Please J one	e) □ Miss	Others p	please specify		Occupation		Code	
Name (as per NRIC / Pa	issport)		. ,					
					Employment Type		Code	
Name to Appear on Ca	rd (Not exceed	ling 19 letters)			Employment Sector		Code	
					Mobile Number			
NRIC / Passport Numbe	er				Office Number			
Passport Expiry Date					Email Address			
Other Identification Nu Identification Number Identification Expiry Da Identification Issuance	: te :				Marital Status (Please √ one) □ Single □ Married □ Div Race (Please √ one) □ Bumiputera □ Chines	vorced 🛛 Sepa		
Nationality (Please √ or □ Malaysian □ Non-Malaysian, plea		ntry, Visa type a	nd expiry dat	e of Visa	Residential Address			
					Postcode	City		
Visa Type			Code		State	Country		
Visa Document Numbe	r				Business Mailing Address			
Visa Expiry Date		1	1					
Residency Status (Plea s	se√one) nanent Resider	ncy 🗆 MM:	2H		Postcode City State Country			
🗆 Non-Resident, please	e specify Count	rv of Residence	•		Natharia Natiday Nama (fa			
,					Mother's Maiden Name (fo	r verification pu	irposes)	
Gender (Please √ one) □ Male □ Female								
Date of Birth					Gross Annual Income	R	M	
					Card Credit Limit %'		%	%
					['] In multiples of 10s, e.g.: 10%; 30	0%; 50%		

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EMERGENCY CONTACT

Name	Relationship Cardholder / Contact Nur	/ Nominee							
TRANSACTION ALERT SERVICES									
Alert me if transaction exceeds:									
(The Bank's default value applies if left blank)									
□ RM1,000 □ RM2,000 □ RM3,000 □ RM	v15,000								
 I wish to unsubscribe from Transaction Alert Services (by checking this box you will stop receiving any Transaction Alert for your CIMB SME BusinessCard) 									
DECLARATION SECTION									
I / We wish to appoint the above nominee to receive a CIMB SME BusinessCard. I / We understand that CIMB Bank may decline my / our nomination without providing any reason and any notice.									
Declaration on Politically Exposed Person ¹ ("PEP") I declare that I am / used to be formerly a Politically Expos	sed Person ("PEP") ¹ / Family Member ² of	the PEP/Close Associates ³ of the PEP.							
PEP 🗆 Yes 🗆 No									
If "Yes" has been selected, please tick (V) on the appropria	ate boxes in the table below. For further	clarification please refer to the "Notes"							
□ I am / We are PEP ¹	Code	(Please find the respective codes under Notes)							
□ I am / We are a Family Member² of the PEP	Code	(Please find the respective codes under Notes)							
□ I am / We are Close Associate³ of the PEP	Code	(Please find the respective codes under Notes)							
For "Others", please specify (mandatory									
 For "Others", please specify (mandatory Note: ¹ Politically Exposed Person ("PEP") – a person who is or has been entrusted with a prominent public function. For example, Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials. ² Family Member of the PEP: 002 – Spouse, 003 – Child, 004, Parents, 005 – Parents-in-law, 006 – Siblings, 007 – Relative / Extended Family. ³ Close Associates of the PEP: 008 – Work Colleague, 009 – Close Friend, 010 – Driver, 011 – Bodyguard, 012 – Secretary, 013 – Political Adviser, 014-Guarantor, 015 – Business Associate, 016 – Business Partner, 017 – Lawyer, 018 – Person Acting on Behalf, 099 – Others (it is mandatory to specify) 									

Declaration on Foreign Account Tax Compliance Act (FATCA)

Please select Yes or No for each of the following questions:

1.	Are you a U.S. Resident? (including a current work permit)	□ Yes	□ No	If yes, Tax Number	
2.	Are you a U.S. Citizen or a Citizen of a U.S. Territory?	□ Yes	□ No	if yes, Tax Number	
3.	Do you hold a U.S. Permanent Resident Card (Green Card)?	□ Yes	□ No	if yes, Tax Number	
4.	Passport / ID Number (please include the 8-digit/letter U.S. Visa,	where app	licable)		

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I / We hereby confirm the information provided in the table above is true, accurate and complete. Subject to the applicable local laws, I / we hereby consent for CIMB Group, its parent or ultimate holding company or any of its affiliates (including branches) (collectively known as "CIMB") to share my / our information with domestic or overseas regulators or tax authorities where necessary to establish my / our tax liability in any / or the relevant jurisdiction. Where required by domestic or overseas regulators or tax authorities, I / we also understand and agree that CIMB may be required to obtain additional documents and / or forms, which I / we will sign, if I / we am / are subject to the relevant jurisdiction's requirements. Where required by domestic or overseas regulators, I / we understand and agree that CIMB may out, from my / our account(s) such amounts as may be required according to applicable laws, regulations, directives, and / or agreements with and/or from domestic or overseas governmental, supervisory or regulatory authorities. I / We also agree and undertake to notify CIMB (within 30 calendar days), or provide the information if requested by the Bank, if there is a change in any information which I / we have provided to CIMB.

Acknowledgement by the Nominee

I / We acknowledge that the product disclosure sheet of CIMB SME BusinessCard ("Card") has been made available to me / us and the key contract terms affecting my / our obligations have been adequately explained to me / us by a staff, representative or agent of CIMB Bank Berhad ("the Bank").

I / We confirm that I / we have read and understood the Terms and Conditions as well as the product disclosure sheet of the Card and the CIMB Group Privacy Notice (which is available at the Bank's website at www.cimb.com.my) and I / we agree to be bound by the same.

AUTHORISATION

This application is signed by:

Authorised Signatory / Card	Authorised Signatory / Card	Signature of Nominee	Company Stamp
Program Administrator	Program Administrator		
Name	Name		
NRIC	NRIC		

For Bank Use						
Name of Staff :						
Staff Email Address :						
Branch Address :						
Office Number :	SMSA		0	0	0	5
Office Number :	Branch Code					
Mobile Number :	Staff ID					