

INDIVIDUAL ACCOUNT		Principal Holder		Joint Holder			
Name <i>(As per NRIC/Passport/Other ID)</i>							
NRIC / Passport No / Other ID No							
Account Number							
CHANGES REQUESTED		Principal Holder		Joint Holder			
1.	Name to be corrected <i>(Please enclosed a copy of your NRIC/Passport/Other ID)</i>						
2.	NRIC/Passport No/Other ID No						
3.	Permanent Address <i>(As per NRIC/Passport/Other ID)</i>						
4.	Residence / Correspondence Address						
5.	Marital Status						
6.	Occupation						
7.	Employer Name						
8.	Employer Address						
9.	Nature of Business						
10.	Annual Income						
11.	Estimate Net Worth						
12.	Contact Number						
13.	Fax Number						
14.	Email Address						
15.	Add Mother's Maiden Name <i>(Principal holder only)</i>						
16.	Update Signature(s) <i>(Applicable for walk-in customer)</i>						
17.	Signature Authorization	<input type="checkbox"/>	Principal to sign	<input type="checkbox"/>	Either one to sign	<input type="checkbox"/>	Both to sign
18.	Tax Residency	<input type="checkbox"/>	Malaysia tax resident	<input type="checkbox"/>	Malaysia and Non-Malaysia tax resident	<input type="checkbox"/>	Non-Malaysia tax resident
19.	Tax Identification Number (TIN)						
20.	Country/Jurisdiction of Tax Residence						
21.	Indicate the "reason" if the TIN Country provided but without the TIN number						
22.	Distribution Instruction <i>(Not applicable to OnePRS Scheme/EPF-MIS)</i>	<input type="checkbox"/>	Reinvest	<input type="checkbox"/>	TT into Bank Account <i>(Please complete item 23)</i>		
23.	Bank Account Details	Bank Name :					
		Account Name:					
		Account Number:					
24.	Authorization to Disclose Investment Details to Adviser	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No		

CORPORATE ACCOUNT					
Company Registered Name					
Company Registration No (New)					
Sales & Service Tax (SST)					
Registration Number					
Account Number					
CHANGES REQUESTED					
1.	Change of Shareholders/Directors	<input type="checkbox"/>	Yes	Item No.1 & 2 <i>(Please provide Certified True Copy of the Board Resolution for the changes requested)</i>	
2.	Change of Authorised Signatory	<input type="checkbox"/>	Yes		
3.	Correspondence Address				
4.	Company Email Address				
5.	Company Contact Number/Fax	Tel No:		Fax No:	
6.	Change of Contact Person	Name 1		Tel No:	Email Address:
		Name 2		Tel No:	Email Address:
7.	Tax Residency	<input type="checkbox"/>	Malaysia tax resident	<input type="checkbox"/>	Malaysia and Non-Malaysia tax resident
8.	Tax Identification Number (TIN)				
9.	Country / Jurisdiction of Tax Residence				
10.	Indicate the "reason" if the TIN Country provided but without the TIN number				
11.	Distribution Instruction <i>(Not applicable to OnePRS Scheme/EPF-MIS)</i>	<input type="checkbox"/>	Reinvest	<input type="checkbox"/>	TT into Bank Account <i>(Please complete item 13)</i>
12.	Estimate Net Worth				
13.	Bank Account Details	Bank Name :			
		Account Name:			
		Account Number:			
14.	Authorization to Disclose Investment Details to Adviser	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

DECLARATION BY UNITHOLDER (S)/MEMBER(S)		
<p>I/We confirm that the information provided is correct and authorize Kenanga Investors Berhad to act on the changes. I/We agree that I/we have read understood the terms and conditions and agree to be bound by it.</p>		
<p>_____ Signature of Principal Holder / Authorized Corporate Signatory</p>	<p>_____ Signature of Joint Holder / Authorized Corporate Signatory</p>	<p>_____ Date</p>
<p>Company Stamp:</p>		

DECLARATION BY UNITHOLDER (S)/MEMBER(S)

1. This Change Request will not be processed unless it has been signed by the authorized unitholder(s)/member(s). For changes requested for joint accounts where signatory instruction is "Both to Sign", the Change Request form must be duly signed by both/all parties.
2. Kenanga Investors Berhad (hereinafter known as KIB) may require additional documentations to effect the changes requested. This Change Request will not be processed if the required documentations have not been received by KIB.
3. KIB will not be liable for any loss incurred due to incorrect information being supplied by the unitholder(s)/member(s).
4. KIB reserves the right to withhold processing of any unclear, incomplete or ambiguous requests forwarded by the unitholder(s)/member(s).
5. The responsibility of ensuring that the Change Request has been received and acted upon by KIB will lie with the unitholder(s)/member(s). A fax confirmation receipt in the hands of the sender will not be regarded as proof that KIB has received a specific document.
6. Unitholder(s)/member(s) can check and confirm that the Change Request has been acted upon by checking the unitholder(s)/member(s) profile on KenEasy KIB's customer online account portal (accessible through www.kenangainvestors.com.my).
7. Where this Change Request form is signed on behalf of the unitholder(s)/member(s), the signatory warrants that he/she has authority to do so, that the information contained herein is correct in all respects and he/she indemnifies KIB against any and all damages and/or loss arising from such event.
8. KIB shall not be liable or responsible, for any reason, in the event that the signatory to this is not duly authorised and the signatory indemnifies KIB against any and all damages and/or loss arising from such event.
9. KIB will not be liable for any damages or losses of whatsoever nature arising out of KIB's failure to action this instruction due to occurrences beyond the control of KIB.
10. Copies of all verification documentation must accompany this Change Request Form. KIB will not be obliged to process this form until it has received the required documentation.
11. KIB will not be liable for any loss or damage of whatsoever nature arising from the inability of KIB to process his form due to the fact that the requirements of the relevant regulatory Acts and Guidelines have not been complied with.
12. The unitholder(s)/member(s) indemnifies and holds KIB harmless against any loss or damage which the unitholder(s)/member(s) may suffer as a result of any commission or omission by KIB.

FOR OFFICE USE

Received by:	Updated by:	Verified by:
Date	Date	Date

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