

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.	Correspondence Address				
4.	Marital Status				
5.	Occupation				
6.	Nature of Business				
7.	Annual Income				
8.	Contact Number				
9.	Fax Number				
10.	Email Address				
11.	Add Mother's Maiden Name <i>(Principal holder only)</i>				
12.	Update Signature(s) <i>(Applicable for walk-in customer)</i>				
13.	Signature Authorization		Principal to sign		Either one to sign
14.	Tax Residency		Malaysia tax resident		Malaysia and Non-Malaysia tax resident
15.	Distribution Instruction <i>(Not applicable to OnePRS Scheme/EPF-MIS)</i>		Reinvest		TT into Bank Account <i>(Please complete item 16)</i>
16.	Bank Account Details	Bank Name :			
		Account Name:			
		Account Number:			
17.	Authorization to Disclose Investment Details to Adviser		Yes		No

CORPORATE ACCOUNT					
Company Registered Name					
Company Registration No					
Account Number					
CHANGES REQUESTED					
1.	Change of Shareholders/Directors		Yes	Item No.1 & 2	
2.	Change of Authorised Signatory		Yes	<i>(Please provide Certified True Copy of the Board Resolution for the changes requested)</i>	
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:
		Name 2			Tel No:
7.	Tax Residency		Malaysia tax resident		Malaysia and Non-Malaysia tax resident
8.	Distribution Instruction <i>(Not applicable to OnePRS Scheme/EPF-MIS)</i>		Reinvest		TT into Bank Account <i>(Please complete item 15)</i>
9.	Bank Account Details	Bank Name :			
		Account Name:			
		Account Number:			
10.	Authorization to Disclose Investment Details to Adviser		Yes		No

**DECLARATION BY UNITHOLDER (S)/MEMBER(S)**

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.

Signature of Principal Holder /  
Authorized Corporate Signatory

Signature of Joint Holder /  
Authorized Corporate Signatory

Date

Company Stamp:

**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](http://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:

Approved by (Data Officer):

Date

Date

Date

Date