



**RHB Investment Bank Berhad** 19663-P

(A Participating Organisation of Bursa Malaysia Securities Berhad)  
(A Trading Participant of Bursa Malaysia Derivatives Berhad)  
Level 10, Tower One, RHB Centre, Jalan Tun Razak, 50400 Kuala Lumpur, Malaysia  
Tel : +603 9285 2233 Fax : +603 9284 7658

**For Office Use Only**

Client's CIF No.	
Third Party's CIF No.	
Date Received	- -
Date Updated	- -

**STANDING INSTRUCTION FOR THIRD PARTY'S DEPOSIT**

**This form is applicable only to third party depositor who is an immediate family member or for company it is within the same corporation. (Immediate family member include spouse, children, parents and siblings. Companies within the same corporation include holding company as well as subsidiaries.)**

**Notes:-**

- 1) The fields in item (A) to (C) are to be duly completed.
- 2) When third party depositor is a corporate, Board Resolution authorising the payment and Form 49/ Notification of Change in the Register of Directors, Managers and Secretaries are to be obtained (Certified True Copy, CTC).
- 3) When third party depositor is an immediate family member, marriage certificate/ birth certification and/ or other supporting document to indicate their relationship are to be obtained.

**(A) CLIENT'S DATA**

Trading Account No.															
Client Name (As per NRIC / Passport / Business Regist.)															
NRIC / Passport No. / Regist.No.						Old NRIC No.									

**(B) THIRD PARTY DEPOSITOR'S PARTICULARS AND DECLARATIONS**

Third Party Depositor's Name (As per NRIC / Passport / Business Regist.)																	
NRIC / Passport / Regist. No						Old NRIC No.											
Relationship of the Third Party Depositor with Client																	
Date of Birth	-	-													Nationality		
Correspondence Address																	
	Postcode				State				Country								
Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married													Contact No.		
Name of Employer / Company																	
Nature of Business (Malaysia Standard Industry Code - MSIC)	<input type="checkbox"/> Construction <input type="checkbox"/> Mining and Quarrying <input type="checkbox"/> Transportation and Storage <input type="checkbox"/> Arts, Entertainment and Recreation <input type="checkbox"/> Other Service Activities <input type="checkbox"/> Public Administration and Defense; Compulsory Social Security <input type="checkbox"/> Activities of Households as Employers; Undifferentiated Goods and Services Producing Activities of Households for Own Use			<input type="checkbox"/> Education <input type="checkbox"/> Manufacturing <input type="checkbox"/> Real Estate Activities <input type="checkbox"/> Information and Communication <input type="checkbox"/> Accommodation and Food Service Activities <input type="checkbox"/> Electricity, Gas, Steam and Air Conditioning Supply <input type="checkbox"/> Wholesale and Retail Trade; Repair of Motor Vehicles and Motorcycles			<input type="checkbox"/> Agriculture, Forestry and Fishing <input type="checkbox"/> Human Health and Social Work Activities <input type="checkbox"/> Financial and Insurance / Takaful Activities <input type="checkbox"/> Administrative and Support Service Activities <input type="checkbox"/> Professional, Scientific and Technical Activities <input type="checkbox"/> Water Supply; Sewerage, Waste Management and Remediation Activities <input type="checkbox"/> Activities of Extraterritorial Organizations and Bodies										
Occupation Code (Refer to Masco's Code, please specify)*	Please specify detail MSIC Code* _____																
Monthly Income	<input type="checkbox"/> RM2,000 and below <input type="checkbox"/> RM6,001 - RM10,000 <input type="checkbox"/> RM50,001 - RM100,000			<input type="checkbox"/> RM2,001 - RM4,000 <input type="checkbox"/> RM10,001 - RM25,000 <input type="checkbox"/> RM101,000 and above			<input type="checkbox"/> RM4,001 - RM6,000 <input type="checkbox"/> RM25,001 - RM50,000										
Name of Authorised Personnel (corporate)																	
NRIC / Passport No. of Authorised Personnel																	

I / We declare that the abovementioned Third Party Deposit was issued / made by me / to be deposited into the Trading Account as indicated above for the trading activities and settlement purpose. I / We further declare that the above Third Party Deposit and the transaction thereof does not constitute any form of money laundering in any way and I / we do hereby undertake to indemnify and keep RHBIB fully indemnified against any losses, damages, debts, actions, claims demands, costs, charges and expenses which RHBIB may sustain, incur and be liable as a result or as a consequence of you acceding to this arrangement.

I / We hereby authorise and consent for RHB Investment Bank Berhad ("RHBIB") to conduct independent verification and / or inquiries from credit reference agencies and / or any registered Credit Reporting Agencies as defined under the Credit Reporting Agencies Act 2010 ("Credit Report Agencies") in respect of any credit information.

Specimen signature and concurrence of the Third Party Depositor or Authorised Signatory (corporate)  
(for verification purpose where applicable)

Date :

**(C) AUTHORISATION BY THE ACCOUNT HOLDER (CLIENT)**

I / We hereby authorise the above third party depositor to deposit into my / our Trading Account for my / our trading activities and settlement purposes until such time this authorisation is officially revoked by me / us. I / We further declare that the instruction does not constitute any form of money laundering and I / we do hereby undertake to indemnify and keep RHBIB fully indemnified against any losses, damages, debts, actions, claims, demands, costs, charges and expenses which RHBIB may sustain, incur and be liable as a result or as a consequence of its action in accordance with my / our standing instruction herein. I / We shall inform RHBIB accordingly should there be any changes or updates to the third party's particulars that will have an effect on my / our standing instruction herein.

Signature of Client (Individual) / Authorised Signatory (Corporate) :

Date :

Please affix company stamp/seal (Corporate Client Only) :

**DECLARATION BY DEALER'S REPRESENTATIVE ("DR") / FUTURES BROKER'S REPRESENTATIVE ("FBR") / PRIVATE BANKER ("PB")**

I confirm that the Client has appeared before me to execute this instruction form authenticating the said instruction. In consideration thereof, I hereby undertake to indemnify and keep RHBIB fully indemnified against any losses, damages, debts, actions, claims, demands, costs, charges, which RHBIB may sustain, incur and be liable as a result or in consequence of its action in accordance with the instruction herein.

Signature of DR / FBR / PB :

DR / FBR / PB Code :  
(where applicable)

Name of DR / FBR / PB :

Date :

**FOR OFFICE USE ONLY**

Contact Third Party Depositor

	Signature	Staff Name	Time	Date
Attended By :				
Remark/Purpose :				
	Signature	Staff Name	Time	Date
CIF Created By :				
Verified By :				