

# **DOCUMENTATION CHECKLIST - INDIVIDUAL ACCOUNT**

# Forms and documents required to be submitted:

Part A: Forms and Identification Documents Required
Duly signed and completed IndividualAccount Opening Form (AOF-I)
Duly signed and completed Notice on Personal Data and Privacy to Customer Form (PDPA)
Duly signed and completed Investment Suitability Assessment Form (SA Form - Individual)
Photocopy of the NRIC / Passport for First Applicant
Photocopy of the NRIC / Passport / Birth Certificate for Joint Applicant (if any)
Photocopy of the NRIC / Passport for Beneficial Owner (if any)
Part B: Tax Documentation
Individual / Controlling Person Self-certificati Form ATCA and CRS) for Beneficial Owner (if any)
FATCA - W8 / W9 Form / Certitificate of less of m ionality of U.S. / Form i-407
Part C: Other Supporting Documentation (if necessar
Photocopy of Bank Passbook / Bank Statement
Payment proof - Bank-in Slip / Online Transfer Receipt / Othe

# **Nature of Business Code and Description:**

Code	Nature of Business	Code	Nature of Business	Code	Nature of Siness	Code	Nature of Business
001	Accountant/Accountancy	018	Currency Dealer/Exchange	035	Int'l Bu ess Corp (IBC)	052	Private Investment Co
002	Agriculture/ Mining	019	Dealer in Car/Boat/Plane	036	П	053	Professional Service Co
003	Antique Dealer	020	Dealer in Precious Jewel	037	Lawyer So itors Attract (Legal)	054	Properties
004	Arms Manufacturer/Dealer	021	Education and Teaching	038	Leather Goods Stocks	055	Real Estate Agents Brokers
005	Art Dealer	022	Finance	039	Liquor Store (non-s t)	056	Restaurants
006	Arts/Entertainment	023	Financial Institution	040	Media/Publisher	057	Retail Stores - private owned
007	ATMs Operating Business (non-gov)	024	Food & Beverage	041	Mining	058	Share Broker/Dealer Unregulated
800	Auction House	025	Foreign Financial Colnst	042	Money Service Businesses	059	Shipping Business
009	Bank in non FATF country	026	Government	043	Money Transmitters	060	Technology
010	Casino/Gambling Business	027	Government-Misc	044	None/ Not Applicable	061	Telemarketers
011	Charitable Organisation	028	Government-Political	045	Non-Govtal Organization (NGO)	062	Tourism and Hospitality
012	Cheq Cashing Facilities	029	Healthcare and Medical	046	Not-for-Profit Organization (NFPO)	063	Trading / Services
013	Cigarette Distributors	030	Hotels	047	Others	064	Transport Service
014	Construction	031	Import/ Export Business	048	Parking Garages (non-gov)	065	Travel Agencies
015	Construction/Tradess	032	Industrial Product	049	Pawn Brokers	066	Vending Machine Operator
016	Consumer Product	033	Infrastructure	050	Plantation		
017	Convenience Store	034	Insurance	051	Political Organisation		



Name (As per NRIC)

(Given Name and Family Name are manded)
Name Title (if any e.g. Tun, Datuk)

Malay

Malaysian

Employed

Chinese

Given Name

Race

Nationality

Occupation

Employment Status

# MIM(M)/UT/AOF-I/202410

			AC	CO	UN	T C	)PE	NI	NG	FC	)RI	М (	For	ind	ivid	ua	l onl	v)						4(	)F	-	
Individual	Joint	Г	_		cheme		EPF I			_			· ——	1	1			,						Date	Rec	eived	
In accordance with the requ		L of th							ct 200	 17 +F	nis Fo	rm sho	uld no	t he c	ircul	atad	unlace	. 2000	mna	niad	hv t	ho P	Produ	ıct k	liahli	ahte	Sheet
(PHS) and Prospectus / Supp Document and the Terms and	lementar	y Pro	spect	tus (e	s) (if ar	ny) / I	nform	ation	Memo	rand	um ("	Offer D	ocume	nt"). \	You ar	e re	quired	to rea	d and	d un	derst	tand	the	cont	ents	of the	Offer
Please complete in BLOC	K LETT	TERS	anc	l BL	ACK I	NK o	nly.	Tick	(/) w	here	e apj	plicab	le. An	y alt	erati	ion i	made	musi	t be	cou	nter	rsig	ned.				
<b>SECTION A: 1. FIRST APPLI</b>	CANT P	ERSC	IANC	DE1	TAILS	(Plea	se pro	vide a	photoc	ору с	of NRI	IC / Pas	sport)														
NRIC No. (New)	Ш		Ш		<u> </u>	Ш	Ш	<u>-                                    </u>	Ш					Old	NRIC .	/ Pas	sport N	o./Oth	ers					L		<u> </u>	
Name (As per NRIC)																								<u>L</u>		<u> </u>	
Given Name (Given Name and Family Name are mand	latory if you	r tax re	sidenc	y is oth	er than 1	Malaysi	ia)						Family	Name										L		$\perp$	
Name Title (if any e.g. Tun, Datuk)															Date	of Bi	irth		D	D	-	М	М	-	Y	Y	YY
Occupation														M	arital	Statu	ıs 🔲 S	Single		Mar	ried			oivoro	ed	w	Vidowed
Employment Status	Em	ployed	ł		Self -E	Employ	yed		Not A	Applic	able (	(e.g. Stu	dent, H	ousew	ife, Pe	nsion	er)										
Nature of Business	Code							Oth	L																	$\Box$	
Name of Employer/Company Name	(Please rep	fer to th	e list p	rovidea	1) 			(Plea	ase speci	fy)	Т			Т	Τ			T						Г		$\top$	$\overline{}$
Race	Ма	lay	П	Ching		L In	dian	$\overline{\Box}$	Others			Stat	us F	Bum	ni	$\Box$	Non Bu	mi		Ge	nder	<u> </u>	   	1 ale	 	— <u>Г</u>	emale
Nationality	— □ ма	laysiar	 n _		n-Ma			ease spec	-	1		1		<u>,</u>				T						$\overline{}$	 	<del>-</del>	$\overline{}$
Source of Income	=	ploym	- 4		Bus es	ss 🛡	_		Inherita	ance	一	Other	s S				Religio	n_L	Г	Тм	uslin	<u>I</u> n	_	1 Nc	n-Mus	L slim	
Monthly Income	=	t Speci	_ \		T	 Tu	n te				$\overline{}$	-	01 to RM	13 000	)	_	_	001 to	RM5	_	uo	 	☐ ☐ RI	-		RM8,(	000
	=	8,001		115.00	10		<b>V</b> 115,00	O PI	420,00	10			001 to F			F	-	),001 t			100	_	_				200,000
	=						113,01	0 111	120,00		ш	11120,	001 10 1	11100,	000	_	111130	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	O INIT	100,0	,00	_	```	1100	,001	O IXI-IA	200,000
Purpose of Investment	=	ove RM ucation			Retire	ment		/   v	d)	umu	lation	Г	Sav	ings													
												<u> </u>															
<b>2. ADDRESS</b> ( <i>Please provide Cia</i> Permanent Residential:	iy ana Coi	unury)							_	_																	
Address line 1		_																									
								7					V	Τ	Τ			Τ								Т	
Address line 2	$\frac{1}{1}$				<u> </u>			+		1																$\mp$	
Address line 2 Address line 3																										<b>—</b>	
																		P	ostco	de							
Address line 3												Count						P	ostco	de							
Address line 3 Town/City	rent from the	e above,										Count						P	ostcoo	de							
Address line 3  Town/City  State:	errent from the	e above,										Count						P	ostco	de							
Address line 3  Town/City  State:  Correspondence (Please complete if difference)	Trent from the	e above,										Count						P	ostco	de							
Address line 3  Town/City  State:  Correspondence (Please complete if difference of the complete of the comple	Trent from the	e above										Count						P	ostcoo	de							
Address line 3  Town/City  State:  Correspondence (Please complete if different differ	The state of the s	e above										Count							ostcoo								
Address line 3  Town/City  State:  Correspondence (Please complete if diffe Address line 1  Address line 2  Address line 3	rent from the											Count	y [														
Address line 3  Town/City  State:  Correspondence (Please complete if different address line 1  Address line 2  Address line 3  Town/City													у _														
Address line 3  Town/City State:  Correspondence (Please complete if diffe Address line 1 Address line 2 Address line 3  Town/City State:													y	Offi	Tice Ph	one											
Address line 3  Town/City  State:  Correspondence (Please complete if difference and the state of the state o	DETAILS												у		Tice Ph	one											
Address line 3  Town/City State:  Correspondence (Please complete if difference Address line 1  Address line 2  Address line 3  Town/City State:  3. TELECOMMUNICATION I	DETAILS												y			one				de							
Address line 3  Town/City  State:  Correspondence (Please complete if different differ	DETAILS			The state of the s				The second secon	I I I I I I I I I I I I I I I I I I I		To your	Countri		Fax	No.			P	ostcoo	de	or SMS	Sarea		to hat	l l l l l l l l l l l l l l l l l l l		1 received of
Address line 3  Town/City State:  Correspondence (Please complete if diffe Address line 1  Address line 2  Address line 3  Town/City State:  3. TELECOMMUNICATION I  House Phone Mobile Phone Email Address  Note: By providing your email address and to the state of th	DETAILS	inberto i	aus, we f									Counti	nd/or she	Fax	No.		La constitue deliv	P	ostcoo	de	or sm:	S are a	l	to hau	l l l l l l l l l l l l l l l l l l l	The sent and sent and	1 received of

Note: Please complete RPQ & SA Form for new account opening.

Others

Indian

Non-Malaysian (please specify)

Self -Employed

Family Name

Status 🔲 Bumi

Relationship (With 1st Applicant)

Not Applicable (e.g. Student, Housewife, Pensioner)

Date of Birth

Gender Male

Non Bumi

Female

																							ľ	Ш	1(I)	1)/	UΙ	/ A	UF	-I/	202	<b>24</b> 1	U
Nature of Business	Code									Othe	ers																						
	(Please re	efer to t	he list	provid	ded)	_	, ,			(Plea:	se spec	rify)		_			_								_	_	_	_	_			_	_
Name of Employer/Company Name	<u> </u>					<u> </u>	$\sqsubseteq$							$\sqsubseteq$													<u> </u>	Ļ	L		Ш		
Monthly Income	_	t Spe				L	_		RM1,5				L			1 to RI				L			1 to F				L				RM8		
	_	18,00°				L	RM	115,0	001 to	o RM	120,0	00	L	RM	120,0	01 to	RM5	50,00	0	L	RM	50,0	01 to	RM'	100,0	000	L	_ RI	M100	,001	to RN	1200	,000
Purpose of Investment	=	ove RI ucatio		0,000 	_	etiren	nent			Weal	Ith Ac	cumi	ulatio	n		Sav	vings	S															
2. ADDRESS (Please provide C	ity and C	Countr	<i>y</i> )																														
Permanent Residential:																																	
Address line 1																																	
Address line 2																													L		Ш		
Address line 3	$\perp \perp$	_			L		Ш									_	_	_	4		4							L	L		Ш		ᆜ
Town/City	Ш	+	L	L	L	L	Ш	_			Ц						4	_	4		4	_	Po	stco	de			L	Ļ	Щ	Щ		_
State:	Ш		L											Co	untry	L	$\perp$		$\perp$									L	L	Ш			
Correspondence (Please complete if diffe	rent from ti	he abov	e)	_	_	_		_							_	_	_	_	_	_	_	_	_					_	_				$\neg$
Address line 1	++	+	$\vdash$	$\vdash$	$\vdash$		Н									+	$\dashv$	+	$\dashv$		+		_					⊨	⊨	Н	Н		_
Address line 2	++	+	$\vdash$	<u> </u>	┢		Н								+	+	$\dashv$	$\dashv$	$\dashv$	_	$\dashv$	$\dashv$	_					$\vdash$	⊢	Н	Н		$\dashv$
Address line 3	++	+	$\vdash$	$\vdash$					_					-	_	$\dashv$	$\dashv$	$\dashv$	$\dashv$		$\dashv$	_	Po	stco	de de			$\vdash$	⊨	Н	H	_	$\dashv$
Town/City	++	+			+	_		_			H			C	untry		$\dashv$	$\dashv$	$\dashv$	+	$\dashv$		1	3100				H	H	H	H		+
State:			$\perp$		Н			_	Ш		$\sqsubseteq$				, unitry	L	_	_	_	_	_	_	_					<u>_</u>	<u>_</u>	ᆜ	ᆜ		
3. TELECOMMUNICATION I House Phone	$\overline{}$	$\overline{}$	_	1	_	<b>)</b> =		_										Office	a Pho	nno.		_	_		1		Ι	_	_	_	_		
Mobile Phone	+	<b>-</b>	╁	H			÷			ĺ								Fax N		JIIC	l I	_	_		] <b>-</b>			┢	⊢	⊨	$\vdash$		=
Email Address		+	+	╁	$\vdash$			•								$\neg$		Tux	10. 		ᆉ	$\dashv$	$\dashv$		<del>-</del>			⊢	⊨	⊨	$\vdash$		$\dashv$
For Distributor Use Only			_	_		_				٧,	4	1:6-	IM /	/M = 1		a) Us	(	) l	!		_	_						_	_	_	_		
Adviser Name								•	Ac	CCOL	. No	_	IMI	II A	aysı	a) U:	se c	IIII	$\overline{}$	$\overline{}$	$\overline{}$	$\overline{}$						Т		anulif			
Adviser Code									Tra		etion							$\dashv$	$\dashv$	$\dashv$	$\dashv$	ᅱ	$\neg$					- 1 г	_ `		sia) S fe Gro		taff
Contact No.	] - [								Re	eceip				7				$\dashv$	_	_	_	_	$\dashv$					-	_	dviser			
											_	$\equiv$								_	_	_	=								_		
Do any of the account holders listed			o any	of th	ne foll	owing	g grou	ps?					<u> </u>				1																
AGED 65 AND ABOVE		HYSIC	-				-					<b>≻</b> L	OW F	INAN	CIAL	P" Z	IENC	CE			≥ L(	OW F	INAN	CIAL	. CAP	ABILI	TIES			>	LIF	E EVI	ENTS
FIRST APPLICANT	Yes		No					JO	INT A	APPL	ICAN	Т				K	[	N	No	I													
Note: <b>Age</b> - 65 and above																7		4				7											
<b>Physical/Cognitive Disabilities</b> - Respectrum autism.	fers to lo	ng-ter	m: (a	a) hea	ıring	impa	irmen	ıt; (b	) visı	ual ii	mpair	rmen	t; (c)	speed	ch im	pairm	ent;	$\langle \langle \rangle$	hysi	cal v.	qir	men	t; or	(e) le	earni	ng in	npair	men	t suci	h as a	dyslex	xia or	low
Low Financial Resilience - Overly is Low Financial Capabilities - Lack of	f confide	nce in	man	agin	g moi	ney o	r kno	wled	lge ab	bout	finan	cial	matte	rs.					1														
Life Events - One who have experied SECTION D: AUTHORITY TO						ing ir	temp	orar	y or	long	-tern	ı fina																					
	_				NI		٦.						T			N E: I	RE	FER	KEL	_					AIVIV	UAL	. / 3	EIYII	-AIN	NUA	IL KI	EPU	KI
First Applicant to Sign * Please select one. Otherwise it will be co	Either onsidered of		_			l	B	oth t	o Sig	n				Ш	Engli	ish			L	☐ Ba	ihasa	Mal	aysia	l									
SECTION F: NOMINEE FOR	INSUR	ANC	E (If.	Free	Insur	rance	is pro	vide	rd)																								
NRIC No. (New)	П	$\overline{}$	1	Т	Τ	1_	$\overline{\Box}$	$\overline{}$	[						Old N	NRIC /	Pas	sport	t No.	/Oth	ers [	$\overline{}$	$\overline{}$				П	Π	Π	П	$\overline{\Box}$		$\overline{}$
Name (As per NRIC)		$\dagger$	Ħ	Ħ	T	<u>,                                     </u>	H	_								1					L	〓	寸		Н			F	H	H	Ħ		Ħ
Date of Birth	DIC	<u> </u>	М	М	<del> </del>	Υ	Υ	Υ	Υ			Rela	ations	ship v	vith F	irst A	pplic	ant	寸	寸	$\exists$	╡	ᆿ					一	H	H	H		ᅱ
SECTION G: INVESTMENT I	DETAIL																		_	!					_				_				
Currency (Please Specify: e.g. MY			etc)		Т	Т	Т	7	(Ple	rase 1	use a	sena	rate f	form	for di	fferen	t cui	rrenc	<i>u</i> )														
(I tease speedy, eig. 111	10, 002,				L			┙	(110	use i	asc u	,	Inco	me l	Distri	ibutio	on P	ay 0	ut														
												aut	o rein	ıvest.	Plea	will b se ref	fer to	o iter	n 7 d	of													
Fund Name		, ,	Gros	ss In	vestr	nenț	Amo	unț		_		ierr	115 an <b>7</b>	iu CO	nuiti0	,,10 IOI	iur	uier (		,	ent M	1ode	•										
	<u> </u>	]		_			4	_	4	닠	<u>.</u>	<u> </u>	_		Ļ	╛							ng / ˈ		graph	ic Tra	ansfe	r		[	☐ E	PF	
		ַוֹ וְ						$\perp$			.∟	L	_		Ļ	╛				Ch	eque	/ Ba	nk Dr	raft					,				
		] [		$\Box$	$\Box$	$\underline{\hspace{1em}}$						L	_			╛			Ch	neque	No.	ļ						$\sqsubseteq$	_				
			$\Box$		$ \_                                   $	$\bot$	$\bot$		$\underline{\mathbb{I}}$		.⊑								Ва	ank N	ame							Ļ	$\sqsubseteq$	$oxedsymbol{oxed}$	$\Box$		
Total Amount				$\Box$	$\Box$	П	T	Т	Т	$\neg$		Г	1						Ar	noun	t				Γ			Γ			_		

# MIM(M)/UT/AOF-I/202410

SECTION H: BANK A	CCC	UN	T DE	TAI	LS (	For .	Reder	mptic	on, In	сот	e Dist	tribu	tion .	Pay (	Out a	ınd O	ther	Payr	nent	Purp	oses)	)								
Bank Name																			Bar	nk Ac	count	No.								_
Bank Account Name(s)		Ī														Г			Ī										П	_

#### SECTION H: MANULIFE INVESTMENT MANAGEMENT (M) BERHAD TERMS AND CONDITIONS

#### 1. TERMS AND CONDITIONS

- The applicant will be bound by these Terms and Conditions and the terms of the Prospectus(es) including any Supplementary Prospectus(es) and Deed of each relevant Fund(s) in respect of all (a) transactions
- Manulife Investment Management (M) Berhad Registration No: 200801033087 (834424-U) (hereinafter referred to as "Manulife IM (Malaysia)") reserves the right to vary the Terms and Conditions (b) at any time without notifying the applicant.

#### 2. ELIGIBILITY

### First Individual Applicant

- Applicant must be 18 years of age and above as at the date of application
- Applicant must sign on this application form and enclose a photocopy of the identification document

#### Joint Applicant

- The applicant may nominate a joint applicant in which case, a photocopy of the identification document must also be provided. A joint applicant who is 18 years of age and above as at the date (a) of application is also required to sign this form.

  A joint applicant who is under 18 years of age need not sign this form. Instead, a photocopy of the identity card or Birth Certificate is required

- In the event of a death of any registered joint applicant, the survivor will be the only person recognised by Manulife IM (Malaysia) and the Trustee as having any title to or interest in the investment units. Units registered in joint names with a minor can be redeemed or transferred by the parent / guardian. On or after the minor's 18th birthday, the parent / guardian may request that the investment units be transferred to the minor's name. In the event of the death of the parent / guardian, Manulife IM (Malaysia) and Trustee shall recognise the estate of the deceased as having any title to or interest in the investment units

#### 3. SUPPORTING DOCUMENTS REQUIRED FOR ACCOUNT OPENING

- Photocopy of NRIC / Passport or any other identification document
- Customer Consent On Personal Data And Privacy Form Signed by 1st Applicant and Joint Applicant (if any)
- Investor Suitability Assessment Form (Include Risk Profile Questionnaire) (c)

#### 4. INSTRUCTIONS / VOICE RECORDINGS

- All instructions given in writing, delivered or sent by facsimile transmission by the applicant or authorised persons as named in this application shall be binding on the applicant. Manulife IM (Malaysia) is not obliged to verify the authenticity of a
- nstructions or the identity of any person giving such instructions.

  vices to record instructions communicated to it and such recording(s) will constitute evidence of the instructions. Manulife IM (Malaysia) shall be entitled to use voice

# 5. CONFIRMATION ADVICES / STATEMENT

Confirmation advices, statements, cheques and er docu be sent at the risk of the applicant's last updated address as notified to Manulife IM (Malaysia). If the applicant fails to notify Manulife IM (Malaysia) in writing of any errors in the objection or to pursue any remedies against Manulife dvice within 14 days, or in the statement within 30 days of issue, the applicant shall be deemed to have waived any right to raise any or the relea ustee(s).

#### 6. STATEMENT / REPORT / NOTICE

- A Transaction Statement or e-Statement or text message o Applicant
- as a record of each and every payment or transaction made. invoice, all statements, Semi-Annual and Annual Report of the Fund(s) via electronic format. By providing email address, you have consented for Manulife
- A half yearly Unit Holder Statement will be issued to summarise all trans ons du aid period to enable the Unit Holder(s) to keep track of his / her investment
- nail to the Unit holder(s) within 2 months from the end of each financial period / year
- Semi-Annual and Annual Report of the Fund(s) will be sent via electronic All correspondences from Manulife IM (Malaysia) shall be directed to the
- All written communication from Manulife IM (Malaysia) to the applican address as notified by the applicant. Proof of posting shall be deemed to be proof of receipt 3 business days after posting.

### 7. DISTRIBUTION INSTRUCTION

Please refer to the relevant Master Prospectus, Prospectus, Supplementary Prospectus (If any) a Info randum for income distribution policy.

If you opt for payout option, you are required to provide your bank account details for direct nce of a valid bank account, the distribution (if any) will be reinvested ig pu In the

Payment cannot be made to accounts in the name of third parties. For joint account, the bank could e be in the name of the principal account holder or in the names of both account

#### 8. AUTHORITY TO OPERATE ACCOUNT

The authorised signatory(ies) will be the only person recognised by Manulife IM (Malaysia) as having the authority to transactions on repurchase, transfer, switching and any other request or carry out any instructions in the operations of the account.

#### 9. REPRESENTATION

The applicant shall not rely on any information or representations other than those contained in the relevant Deed and tus(es) ir mentary Prospectus(es) and Supplementary Deed(s). anv

#### 10. SET-OFF

Manulife IM (Malaysia) is entitled to set off any claim which Manulife IM (Malaysia) or the relevant Trustee(s) may have st any assets, units or cash of the applicant held by Manulife IM (Malaysia) or the relevant Trustee(s).

#### 11. MONIES

- All application monies must be paid or remitted as instructed and any cheque(s) must be honored when presented.
- If an application is rejected in whole or in part, the application monies or balance thereof will be returned (without interest, or any returns in the case of Islamic funds) by Manulife IM (Malaysia) by cheque or, at the cost of the applicant, by telegraphic transfer, within 10 business days from the date of application.
- The applicant confirms that Manulife IM (Malaysia) may issue a cheque in Ringgit Malaysia to settle any redemption or other monies (if any) payable by Manulife IM (Malaysia). Such cheque shall (c) be made payable to the Unit Holder(s) registered from time to time and sent to the last registered address of the Unit Holder(s) on Manulife IM (Malaysia) records unless otherwise notified in writing.

## 12. REJECTION / CANCELLATION OF APPLICATION

Manulife IM (Malaysia) reserves the right to

- Accept or reject any application in whole or in part without assigning any reason;
- Request for additional documents from the applicant to support the application;
  Cancel any investment units issued if the payment for the investment units cannot be matched within 3 business days of the receipt of the application or subscription instruction;
- Reject all EPF applications pending for payment exceeding 45 days, subject to the approval of EPF.
- Vary these terms and conditions at any time without notifying the applicant.

#### 13. FREE INSURANCE

Please refer to the terms and conditions of the respective free insurance brochures, master policies for the applicants who may be eligible for the free insurance. The Manager reserves the rights to modify, replace or discontinue the free insurance without assigning any reasons.

#### 14. ANTI-MONEY LAUNDERING STATEMENTS

The applicant hereby warrants that:

The applicant is the underlying principal of the Account (where applicable);

- No person other than the Applicant has or will have any interest in the Account (where applicable); and
- All monies as may be paid to Manulife IM (Malaysia) from time to time shall come from a legitimate (and not illegal) source; and
- The applicant agrees to provide all such information and documents as may be necessary to verify the applicant's identity and do all such acts and things as may be necessary to enable Manulife IM (Malaysia) to comply with all applicable Anti-Money Laundering and Counter Financing Terrorism (AML/CFT), and Know-Your-Customer laws, rules and regulations (whether in Malaysia or elsewhere). The Applicant agrees that Manulife IM (Malaysia) shall not be liable or responsible in anyway whatsoever and shall be held harmless against any loss arising as a result of or in connection with any delay or failure to process any application or transaction if such information or documents requested by Manulife IM (Malaysia) have not been promptly provided by the applicant to Manulife IM (Malaysia).
- Manulife IM (Malaysia) reserves the right to terminate the relationship if any documents requested pursuant to the AML / CFT requirements are not received within 14 days. In such event of termination, units will be redeemed at the closing NAV price at the end of the business day.

#### 15. INDEMNITY

- (a) The applicant(s) hereby agree(s) to indemnify Manulife IM (Malaysia) and the relevant Trustee(s) and any of their authorised agents against any actions, proceedings, claims, losses, damages, costs and expenses which may be brought against, suffered or incurred by any or all of them arising either directly or indirectly out of or in connection with Manulife IM (Malaysia) accepting, relying on or failing to act on any instructions given by or on behalf of the applicant(s) unless due to the willful default or negligence of Manulife IM (Malaysia).
- The applicant acknowledges and accepts that Manulife IM (Malaysia) has the absolute discretion to rely on facsimile and confirmation from the applicant and undertakes to indemnify and hold harmless Manulife IM (Malaysia), its employees and agents against all costs, expenses, loss of liabilities, claims and demands arising out of reliance on the applicant's confirmation.

#### 16. LEGAL AND TAX IMPLICATIONS

The applicant shall acquaint himself with the relevant tax laws and exchange control regulations in force in the countries of his citizenship, residence or domicile.

#### 17. GOVERNMENT TAX

All fees and charges (e.g. sales charge, switching fee, transfer fee, management fee, trustee fee and any other relevant fee(s) and/or charge(s), where applicable, may be subject to tax that may be introduced by the Government of Malaysia from time to time. The Manager, the Trustee and/or other service providers reserve the right to collect from you and/or the Fund an amount equivalent to the prevailing rate of tax payable for all charges and fees, where applicable.

Your obligation to pay any applicable taxes shall form part of the Terms and Conditions.

#### 18. PAYMENT TO MANULIFE IM (MALAYSIA)

- (a) The completed Account Opening Form should be accompanied by payment and submitted to any Manulife IM (Malaysia) office, or its authorised Advisers.
- (b) Investment payment should be made payable to 'Manulife Investment Management (M) Berhad-Client Trust Account'.
- (c) Manulife IM (Malaysia) shall not be liable to pay any interest to the Unit Holder(s) for any monies held by Manulife IM (Malaysia) for the Unit Holder(s) for any reason(s) whatsoever.
- (d) Units will be issued at the NAV of the Fund as at the next valuation point on forward pricing basis

#### 19. COOLING-OFF PERIOD

Please refer to the Prospectus and Supplementary Prospectus (if any) or Information Memorandum for more information.

### 20. UNIT TRUST LOAN FINANCING RISK DISCLOSURE STATEMENT

#### Investing in a Unit Trust Fund with Borrowed Money Is More Risky than Investing with Your Own Savings.

You should assess if loan financing is suitable for you in light of your objectives, attitude to risk and financial circumstances. You should be aware of the risks, which would include the following:

- (a) The higher the margin of financing (that is, the amount of orrow for every ringgit of your own money which you put in as deposit or down payment), the greater the loss or gain on your investment.
- You should assess whether you have the ability to se on the proposed loan. If your loan is a variable rate loan, and if interest rates rise, your total repayment amount will be increased. (b) pavme
- If unit prices fall beyond a certain level, you may b sked to ditional acceptable collateral (where units are used as collateral) or pay additional amounts on top of your normal instalments. If you fail to comply within the time prescribed, your s may b ld towards the settlement of your loan.
- is means that there may be some years where returns are high and other years where losses are experienced. Whether (d) Returns on unit trusts are not guaranteed and may r venly over ti you eventually realise a gain or loss may be affected by units. The value of units may fall just when you want your money back even though the investment may have done well in the past.

This brief statement cannot disclose all the risks and other aspect. herefore carefully study the terms and conditions before you decide to take a loan. If you are in doubt about any aspect of this risk disclosure statement or the terms of the loan financing hould co e institution offering the loan

#### 21. INFORMATION OF INDIVIDUAL SELF-CERTIFICATION FOR CA Account Tax Compliance Act) AND CRS (Common Reporting Standard)

Regulations based on Foreign Account Tax Compliance Act ("FATCA") and Orga nic Co-operation and Development ("OECD") Common Reporting Standard ("CRS") require financial institutions of an entity account holder's tax residence. Each jurisdiction has its own rules for defining tax to collect and report certain required information based on an individual account ntrol residence. In general, tax residence is the country in which you live. Special circumstance in more than one country at the same time (multiple residencies). The country/countries working overseas, or extended travel) may cause you to be resident elsewhere or resident ax are likely to be your country/countries of tax residence. For more information on tax residence, please consult your tax adviser or the information at the following link for FAT gov/ and http://www.oecd.org/tax/automatic-exchange/crs-implementation -and-assistance/ respectively.

If your tax residence (or the account holder, if you are completing the form on their behalf) is locat information in this form and other financial information with respect to your financial accounts to in which this account is maintained, we may be legally obliged to pass on the atry where the financial institution is located.

#### As a financial institution, we are not allowed to give tax or legal advice.

If you have any questions about this form, these instructions, or defining your tax residency status, please speak to you dviser or domestic tax authority.

# 22. MISCELLANEOUS

References to persons include corporations, references to one gender include both genders and references to the si include the pl ersa.

### 23. CONTACT US

Should you require more information, please contact Customer Service, Manulife Investment Management (M) Berhad 6 Jalan Gelenggang, Damansara Heights, 50490 Kuala Lumpur. Tel No. 03-2719 9271 or email us at MY\_CustomerServ stration 200801033087 (834424-U), 13th Floor, Menara Manulife anulife. m or visit our website at www.manulifeim.com.my.

#### **DECLARATION ON OWNERSHIP OF FUNDS**

A beneficial owner is defined as the natural person who ultimately owns or controls a customer or the person on whose behalf a transaction is being conducted and includes the person who exercises ultimate effective control over a body corporate or unincorporated. Yes [Please complete the individual / Controlling Person Self-certification Form (FATCA & CRS) Form] Is there a beneficial owner in this application □ No If yes, please indicate the following and enclose a copy of his/her NRIC / Passport :

Name	:		 NRIC / Birth Cert. / Passport No.	:
Source of Funds	:		 Source of Wealth	:

Relationship with Applicant:

# **DECLARATION PURSUANT TO FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)**

Please answer the following questions in order to confirm your status under the tax laws and regulations of the United States

3,	
First Applicant	Joint Applicant
Are you a United States citizen / United States resident / United States Permanent Resident	Are you a United States citizen / United States resident / United States Permanent Resident
Alien (i.e. a so-called U.S. green card holder)?	Alien (i.e. a so-called U.S. green card holder)?

If yes, please submit Form W-9 of US Department of the Treasury Internal Revenue Service. A copy of Form W-9 can be obtained from the US IRS website at http://www.irs.gov/pub/irs-pdf/fw9.pdf. If you were born in the U.S. but is no longer a U.S. tax resident, please provide the following documents:

Certificate of loss of nationality of U.S.

If yes, please submit Form W-9 of US Department of the Treasury Internal Revenue Service. A copy of Form W-9 can be obtained from the US IRS website at http://www.irs.gov/pub/irs-pdf/fw9.pdf. If you were born in the U.S. but is no longer a U.S. tax resident, please provide the following documents:

• Certificate of loss of nationality of U.S.

• Form i-407

<b>DECLARATION PURSUANT TO COMMON</b>	N REPORTING STANDARD (CRS) ON TAX I	RESIDENCY			
1. Are you a Malaysia tax resident?					
First Applicant Yes No		Joint Applicant	Yes	☐ No	
	other than U.S. where you are a resident for a separate sheet. Please refer to the OECD				
First Applicant Yes No		Joint Applicant	Yes	☐ No	
First A	pplicant			Joint App	licant
Place of Birth:  Country: Malaysia Others (Please s	specify)	Place of Birth: Country: Mai	aysia 🗌 Other	(Please sp	vecify)
City: (Please specify)		City: (Please spe	ecify)		
Country / Jurisdiction of Tax Residency	Tax Payer Identification Number (TIN) Income Tax Reference Number	Country / Jurisdic	ction of Tax Resi	idency	Tax Payer Identification Number (TIN) Income Tax Reference Number
Please provide reason(s) for not providing the T	IN/income To regor see Number	Please provide reason(	(s) for not providi	ing the TIN/	'income Tax Reference Number
DECLARATION AND SIGNATURE(S)					
I/We declare that the information provided in thi I/We acknowledge and understand that the infor account(s) is/are maintained and exchanged wi to exchange financial account information. I/We have read and understood the applicable gathering, storage, use, processing, disclosure a obligations relating to, but not limited to, inform may be amended from time to time) and to perfi I/We acknowledge, consent to and instruct (a) th information regarding the account holder provice	mation contained to self-cer sation and any that authorities of another controlled in a provisions of the latest projectus / fair stion and reporting of information by by a normal obligations thereunder.	or countries/jurisdiction in memorandum of the r inection with the satisfac plicable to the Fund from	s in which I may be elevant fund (the ction of any gover n time to time, an	be tax resid "Fund") to nmental and nd agree and	thorities of the country/jurisdiction in which this ent pursuant to intergovernmental agreements which this account relates with respect to the d/or regulatory requirements and/or other legal d undertake to be bound by such terms (as the lay be updated from time to time) and any other he Fund, (b) the transfer of such information to
any administrative support provider and proces and (c) the disclosure and reporting of any such the exchange of such information with any gove governmental, regulatory or tax authorities in su	ssor located within the EEA, Canada and India, in information to any governmental or regulations.	are the including rele	essary for the mai vant tax authoriti in which the acc t information in c	intenance of les, of the common to count holder onnection w	he Fund, (b) the transfer of such information to f records or administration of the information ountry in which this account is maintained and r may be tax resident where such countries (or ith FATCA and/or OECD CRS. e/us; or Manulife IM (Malaysia) can suspend or
	the terms and conditions of my/our account) for the terms are the terms ar		nation referenced	d above or	any part thereof or if at any time I/We (or any
I/We undertake to advise Manulife IM (Malaysia) a contained herein to become incorrect or incomp	s soon as possible of any change in circumstances lete and to provide Manulife IM (Malaysia) with a si	which affects to tax resultably self-confication	idency status oth and Declar	ne individual ithin 30 D	I identified in this form or causes the information AYS of such change in circumstances.
	by any court for any criminal offence whether with to any bankruptcy proceedings or failed to meet a		her outs	ide i aysi	a
	and fully understand the Prospectus(es), Suppleme I(s) (if any) for the Fund(s) to be invested in and the e notes, terms and conditions of this form and I/w ained to me/us by the Company, and/or licensed to				dum, Supplementary Information Memorandum istment Management (M) Berhad (the Company and subsequent transactions with the Company
influence the acceptance of this application.	upporting documents provided herein are true, co	·			
	ny reserves the right to reject, withdraw or termi ny loss or damage for such action.			ation withou	ut assigning any reasons thereto and under no
Save and except in the event of gross negligence brought against, suffered or incurred by any or a	will be incurred directly or indirectly when investing, I/we agree to indemnify the Company and any of all of them either directly or indirectly out of or in the company and appears of the company of t	their advisers any actio connection with carrying		claims, loss	es, damages, costs and expenses which may be
I/We acknowledge that I/We have read the above	n has been reached as a result of my/our own inde e Unit Trust Loan Financing Risk Disclosure Staten e information provided, I/we shall notify Manulife Ir	nent and understood its		ılife IM (Mal	aysia) as soon as practicable.
Signature of First Applicant					Signature of Joint Applicant
DD / MM / YYYY	Υ			D	D / M M / Y Y Y Y

Date

Date



# Manulife Investment Management (M) Berhad

# NOTICE ON PERSONAL DATA AND PRIVACY TO CUSTOMERS

This Privacy Notice is issued pursuant to the Personal Data Protection Act 2010.

### Information we collect and how we use it

You have supplied Manulife (which means Manulife Holdings Berhad and all its subsidiary companies) with your personal information in connection with the application for any of our products and the provision of services or compliance with any laws or guidelines issued by regulatory or other authorities. These include and are not limited to details such as your name, identification number, address, phone number and email address as well as other non-public information including your financial, familial and non-familial information ("Personal Information"). Manulife may from time to time request for other Personal Information that may be relevant to consider your request for any other products or services.

The purposes for which your Personal Information are processed and/or used are as follows:-

- a) The processing of your application(s) for products and services offered by Manulife;
- b) Manulife's normal operation in relation to our products, services and facilities provided, including but not limited to marketing; business/regulatory/financial/risk reporting, monitoring and management; updating and communication; product design and development; fraud or crime prevention or investigation; audit; debt collection; statistical research or analysis; seeking advice or enforcement of legal rights; ancillary purposes such as registration for facilities;
- The compliance with the req ants to make disclosure under any law or regulations binding on Manulife or any of c) its affiliates, representatives
- d) Other purposes directly ny of the above. elati

All customers' Personal Information dential. However Manulife may disclose such information to subsidiaries, associated or related companies, profe rs, agents, representatives, third party service providers, suppliers and hal Information may be transferred to places outside of Malaysia as Manuvendors and their respective employees. life may deem fit.

Your continued usage of our products and Service ned as consent for Manulife to process you Personal Information for all the purposes as described above. You may ive your consent or to limit your consent for Manulife to process and retain your Personal Information by v u choose not to give Manulife your consent, you can continue to interact with Manulife, but products and service

### Access and change requests

If you wish to access / change your Personal Information or withdraw use of your Personal information for direct marketing purposes, please contact Customer Service, Manulife Investment Management (M) Berhad at 03-2719 9271 / MY CustomerService@Manulife.com.

# Inquiries and complaints

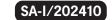
If you have any queries or complaints relating to this Notice, you may cont hal Data Protection Officer at 03-2719 9228 / MIMMB\_PDPA@manulife.com.

Manulife may review and update this Notice from time to time. You can log on to a website or contact Manulife's Personal Data Protection Officer to obtain the latest version of this Notice.

I have read and I understand and consent to the above terms.

First A	۱pp	licant / Authorised Signatory(ies)	Joint	: Ap	plicant / Authorised Signatory(ies)
*Please tio	k o	ne:	*Please tic	k o	ne:
collected o application and discl	r he n or ose	disagree that any personal information and by Manulife (whether contained in this otherwise obtained) may be held, used by Manulife to third parties for the rketing and promotions.	collected of application disclosed	or h or by	[] disagree that any personal information neld by Manulife (whether contained in this otherwise obtained) may be held, used and Manulife to third parties for the purpose of promotions.
Signature	:		Signature	:	
Name	:		Name	:	
NRIC	:		NRIC	:	
Date	:		Date	:	

You may request for the Bahasa Malaysia version of this Form. In the event of any discrepancy between the English and Bahasa Malaysia versions of this Notice, the English version would prevail.





SA Calculator Ref. No.																	SA Form - Individual
	N۷	'EST	ГОБ	R SU	IIT	AB	ILľ	ΤY	AS	SSE	ESS	M	ΕN	ΤI	FO	RM	

This Investor Suitability Assessment Form will guide you in choosing the Unit Trust / Private Retirement Scheme (PRS) funds distributed by Manulife Investment Management (M) Berhad Registration No: 200801033087 (834424-U) (hereinafter referred to as "Manulife IM (Malaysia)") that suit your investment objectives, risk tolerance, financial profile and investment experience. The information you provide will form the basis of our recommendation. It is important to provide accurate and complete information to ensure that suitable Unit Trust / PRS funds are recommended according to your investment needs and objectives.

#### A PERSONAL DETAILS

A. PERSONAL DETAILS		
Investor Name		Account No.
NRIC No. / Passport N	No.	Age
Annual Income	□ < RM100,000	☐ RM200,001 - RM300,000
	☐ RM100,000 - RM200,000	□ > RM300,000
Category of Investor	☐ Retail Investor	
		lividual exceeds RM300,000 or jointly with spouse exceeds RM400,000; or total net joint assets with spouse exceeds RM3 million
		uired to complete Suitability Assessment Form, please proceed to Section E) tor / CEO of a CMSL holder)
Work Experience (Related to investmen	nt) Yes	□ No
Training Attended (Related to investmen	Yes Yes	□ No
B. INVESTMENT OBJEC	CTIVES	7
Objective	Education Retirement	Wealth Accumulation Saving for specific purposes:
	(Expected Age	
		(e.g. house, car, holiday)
Targeted Amount	RM	

## C. RISK PROFILE QUESTIONNAIRE

This questionnaire helps ("Manulife IM (Malaysia)") to determine the indicative asset "location" age of Leit Trust / PRS portfolio that suits your personal risk profile. Your answer to the questions below only provide some indication of your general personal risk profile which may or may not accurately reflect your risk tolerance level.

Please select / circle where applicable.

Dimension	Question	Score
	1. Which of the following best describes your current stage of life?	
	(a) ☐ Young (18-35 years old) with little financial burden	[9]
Demographic Factors	(b) $\square$ Young (18-35 years old) with some financial burden	[5]
(Age and	(c) ☐ Middle-aged (36-55 years old) with little financial burden	[10]
Financial	(d) ☐ Middle-aged (36-55 years old) with some financial burden	[7]
Situation)	(e) $\square$ Retired or nearing retirement (above 55 years old) with little financial burden	[3]
	(f) ☐ Retired or nearing retirement (above 55 years old) with some financial burden	[1]

SA-I/202410

SA Form - Individual

pension scheme if any) do you have?  General Investment Experience (c) □ 1 year to less than 3 years    Description of the pension scheme if any) do you have?    Column of the pension scheme if any) do you have?	[0]
Investment Experience (b)   (b)   Less than 1 year (c)   1 year to less than 3 years	
Experience (c) 1 year to less than 3 years	[1]
	[2]
	[3]
(e) □ 5 years or above	[4]
3. Which of the following investment products have you invested in during the past 3 years? ( <i>Tick one or more, if applicable. Your answer with the highest score is final</i> )	
Investment (a) ☐ Principal-protected products / Investment-grade bonds	[1]
Product Knowledge, (b) □ Foreign currencies / Gold	[2]
Experience (c) Balanced funds / Mixed allocation funds	[3]
and Portfolio (d) ☐ Stocks / ETFs / Equity funds	[5]
(e) ☐ High yield bond funds / Hedge funds / Derivatives / Leveraged products / Cryptocurrency	[7]
(f) None of ab ve	[0]
4. In general what is the time period intended for your financial investment?	
(a) ☐ Less than - year	[1]
Investment (b) 1 year to less man years	[2]
Horizon (c) \( \sigma\) 3 years to less than Eyears	[3]
(d) □ 5 years or above	[4]
5. What is the price fluctuation on five indicates a fall not a within consumation	
<ul><li>5. What is the price fluctuation on financial N estme you can tolerate within one year?</li><li>(a) □ less than 5%</li></ul>	[1]
	[1]
Risk (b) 5% to less than 10% Attitude (c) = 10% to less than 15%	[2]
(c) 10% to less than 15%	[3]
(d) ☐ 15% to less than 25%	[4]
(e)   25% or above	[5]
6. Which of the following best describes your overall investment objective?	
(a) ☐ Capital preservation - keep investment loss at a minimum with little concern on returns	[1]
(b) ☐ Income orientation - earn stable income or beat inflation	[2]
Investment Objective (c) Income-and-growth - achieve returns on the balance of modest income and	[3]
capital appreciation	
(d) Growth orientation - aim at returns with focus on capital appreciation	[4]
(e) ☐ Aggressive growth - look for maximum returns possibly from high-risk financial investments	[5]
Please total your points from the six questions and write your risk score in the box:	

# <u>Due Diligence Process</u>

- 1. Owing to the possibility of more than one choice in question 3, the choice of the highest score is only applied to scoring in this question.
- 2. For the sake of consistency, answer 2(a) cannot coexist with any one of answers 3(a) to 3(e).



# D. RISK ASSESSMENT RESULT (to be completed by Unit Trust / PRS Adviser):

(i) Risk Profile (Please select one in accordance to Risk Score)

Risk Score	General Risk Profile Description		Recommended Asset Allocation	Your Score	Maximum Risk Score
4-14	Conservative	You can accept investments with low risk returns.	Equity: 10% - 30% Bond/ Money market: 70% - 90%		2.90
15 - 25	Moderate	You can accept investments with medium risk exposure and price fluctuation for capital growth potential.	Equity: 40% - 60% Bond/ Money market: 40% - 60%		3.80
26-35	High Risk	You can accept investments with high risk exposure and price fluctuation for substantial capital growth.	Equity: 70% - 90% Bond/ Money market: 10% - 30%		4.70

(II) D	ecision (Please select one)
<b>With</b>	<u>Servicing Advis</u> er
	<b>Within Risk Profile</b> - Portfolio of products recommended by Unit Trust / PRS Adviser is <b>in accordance</b> with the investor's risk profile.
	<b>Exceeds Risk Profile</b> - Nor ithstanding the result of this assessment, the investor confirms and decides to purchase the portfolio of products based on the investor's judgement / preference which the portfolio's risk profile may be <b>exceeding</b> he is vestor's risk profile.
	Self-Execution - Actiser only provides administrative service to investor who has investment knowledge. The investor confirm and ecides to purchase the portfolio of products based on the investor's judgement / preference which the portfolio's risk profile may be exceeding the investor's risk profile.
With	out Servicing Adviser
	Self-Execution - Investor decided to select own Funds to invest  Notwithstanding the result of this assessment the restor confirms and decides to purchase the portfolio of products based on the investor's judgement of province which the portfolio's risk profile may be exceeding the investor's risk profile.

# **E. ACKNOWLEDGEMENT & DECLARATION:**

No.	Remarks					
1	I declare that all information disclosed is true, complete and a surate.					
2	I acknowledge receipt of a copy of the prospectus / product highlight sheet (PNS) / Disclosure Document (if any) and the relevant disclosure document which have a en give to me.					
3	(a) With Servicing Adviser - The Unit Trust / PRS adviser has explained and I have understood the features and risks of the fund(s). I understand and shall bear full responsibility for my investment decisions.					
	(b) Without Servicing Adviser - I have understood the features and risks of the fund(s). I understand and shall bear full responsibility for my investment decisions.					
4	I decline to provide certain information required for product suitability assessment and understand that this may adversely affect my suitability assessment.					
	Investor's Signature	Unit Trust / PRS Adviser's Sig	nature			
Name:		Adviser Name:				
		Adviser Code:				
	· Undertaken:	Date Undertaken:				

THE RECOMMENDATION IS MADE BASED ON INFORMATION OBTAINED FROM THE SUITABILITY ASSESSMENT. INVESTORS ARE ADVISED TO EXERCISE JUDGMENT IN MAKING AN INFORMED DECISION IN RELATION TO THE UNIT TRUST / PRS FUNDS.

THE ASSESSMENT RESULTS ONLY SERVE AS A REFERENCE FOR YOUR CONSIDERATION AND SHOULD NOT BE CONSTRUED AS AND SHALL NOT FORM PART OF AN OFFER OR SOLICITATION TO BUY OR SELL ANY UNIT TRUST / PRS FUNDS.