

**Full Name** 

(as per NRIC/Passport)

AVIAN CAPITAL SDN. BHD. (202201014274) (1459971-V)
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Please complete in BLOCK LETTERS and tick ( $\sqrt{\ }$ ) where applicable. Any alterations made must be countersigned.

# PERSONAL PARTICULARS OF ACCOUNT HOLDER

Address						
Email			Tax Resident ^	☐Malaysian ☐Non-Malaysian, country code:		
Contact No.	Home: C	Office:		H/P:		
Date of Birth (dd/mm/yyyy)		☐Malaysian ☐Non-Malaysian, country code:				
NRIC/Passport No.*			Gender	☐Male ☐Female		
Occupation ^	Code:	□Others,	please specify:			
Nature of Business ^	Code:	□Others,	please specify:			
Name of Company						
Company's Address						
Contact No.	Office:		Fax:			
Annual Income	□Up to RM300,000 □RM300,001-RM600,000	□RM600,	,001 – RM1,200,000 [	□RM1,200,001 – RM3,000,000 □A	Above RM3,000,000	
Estimated Net Worth	□Up to RM1,000,000 □RM1,000,001-RM5,0	,000,000	□RM5,000,001 –	RM30,000,000	0,000,000	
Purpose of Investment #	☐ Capital Appreciation ☐ Education F☐ Others:	Funding	Retirement Funding	□Saving	□Dividend	
Source of Investment Funds #	□Salary/Commission □Investment □ □Others: □□	Returns	☐Business Income	☐Rental Income	☐Interest Income	
Source of Wealth #	☐Savings ☐Pension Fur ☐Others:	ınd / EPF	☐Sale of Property	□Inheritance	□Gift	
	I oss out with the remark "For Avian Capital Use Only") nder Country, Occupation, Nature of Business Code and I	Description	ı			
2. PARTICULARS OF	F JOINT ACCOUNT HOLDER (if ap	pplicable	e)			
Name of Joint Account Holder (as per NRIC/Passport)			Salutation	□Mr □Mrs □Ms □Others, please specify:		
Address  Please Tick if address is the same as primary holder's		·				
Email			Tax Resident			
Contact No.	Home: C	Office:		H/P:		
Date of Birth (dd/mm/yyyy)		☐Malaysian ☐Non-Malaysian, country code:				
NRIC/Passport No.*			Gender	☐Male ☐Female		
Occupation ^	Code:	☐Others,	please specify:			
Nature of Business ^	Code:	□Others,	please specify:			
Name of Company						

□Mr

Salutation

□Mrs

☐Others, please specify:

□Ms

Contact No.	Office:		Fax:		
Annual Income	□Up to RM300,000 □	RM300,001-RM600,000	☐RM600,001 – RM1,200,000	□RM1,200,001 – RM3,000,000	☐Above RM3,000,000
Estimated Net Worth	□Up to RM1,000,000	□RM1,000,001-RM5,000	00,000 □RM5,000,001	- RM30,000,000 □Ab	ove RM30,000,000
Purpose of Investment #	☐Capital Appreciation☐Others:	□Education Fur	nding Retirement Fundin	ng □Saving	□Dividend
Source of Investment Funds #	□Salary/Commission □Others:	□Investment Re	eturns Business Income	□Rental Inc	come
Source of Wealth #	☐Savings ☐Others:	□Pension Fund	d / EPF ☐ Sale of Property	□Inheritand	e □Gift
Relationship to the Principal Holder	□Parent □Others:	Sibling	□Spouse	□Child	
To provide copy of NRIC/Passport ( Kindly refer to list of codes available May select more than 1			1		
B. OPERATION OF	ACCOUNT (for ac	count with joint h	nolder)		
Joint Account	☐ Principal Holder to sign	☐ Either one t	to sign	o sign	
We wish to invest into Who n Unlisted Capital Market F sued by the Securities Cor	Products Under the Lodg mmission Malaysia ("SC	reby declared and confi e and Launch Framewo "), and any person who	ork and the Guidelines o comes within any of the	n Categories of Sophistic e categories of investors	cated Investors ("Guideling set out in Part 1, Schede
We wish to invest into Who n Unlisted Capital Market F sued by the Securities Cor nd 7 of the Capital Markets We hereby acknowledge a nay be suffered by Avian Ca	elesale Fund(s). I/We here Products Under the Lodg Immission Malaysia ("SC I and Services Act 2007 of I agree to indemnify A I apital as a result of any in	reby declared and confi e and Launch Framewo "), and any person who (Please refer to the Who Avian Capital Sdn. Bhd inaccuracy of the decla	ork and the Guidelines o o comes within any of the olesale Fund's Informati d. against all actions, sui	n Categories of Sophistic e categories of investors on Memorandum definiti	cated Investors ("Guidelir set out in Part 1, Schedi on of Sophisticated inves
We wish to invest into Who on Unlisted Capital Market Fesued by the Securities Corand 7 of the Capital Markets We hereby acknowledge anay be suffered by Avian Ca	elesale Fund(s). I/We here Products Under the Lodg Immission Malaysia ("SC I and Services Act 2007 of I agree to indemnify A I apital as a result of any in	reby declared and confi e and Launch Framewo "), and any person who (Please refer to the Who Avian Capital Sdn. Bhd inaccuracy of the decla	ork and the Guidelines o o comes within any of the olesale Fund's Informati d. against all actions, sui	n Categories of Sophistic e categories of investors on Memorandum definiti its, proceedings, claims,	cated Investors ("Guidelin set out in Part 1, Schedu on of Sophisticated inves damages, and losses w
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/We wish to invest into Who on Unlisted Capital Market F ssued by the Securities Cor and 7 of the Capital Markets /We hereby acknowledge a nay be suffered by Avian Ca /We hereby solemnly affirm ☐ High-Net Worth individual	elesale Fund(s). I/We here Products Under the Lodg Immission Malaysia ("SC Index and Services Act 2007 of the learning of the	reby declared and confi e and Launch Framewo "), and any person who (Please refer to the Who Avian Capital Sdn. Bhd inaccuracy of the decla	ork and the Guidelines of comes within any of the clesale Fund's Information.  d. against all actions, suitarations made herein.    High-Net Worth individual Signature (Joint Holder)	n Categories of Sophistic e categories of investors on Memorandum definiti its, proceedings, claims,	cated Investors ("Guidelin set out in Part 1, Schedu on of Sophisticated inves damages, and losses w
We wish to invest into Who in Unlisted Capital Market Fesued by the Securities Corond 7 of the Capital Markets We hereby acknowledge anay be suffered by Avian Caw We hereby solemnly affirm High-Net Worth individual Signature	elesale Fund(s). I/We here Products Under the Lodg Immission Malaysia ("SC Index and Services Act 2007 of the learning of the	reby declared and confi e and Launch Framewo "), and any person who (Please refer to the Who Avian Capital Sdn. Bhd inaccuracy of the decla above are true.	ork and the Guidelines of comes within any of the clesale Fund's Information.  d. against all actions, suitarations made herein.  High-Net Worth individual Signature (Joint Holder)  Name:	n Categories of Sophistic e categories of investors on Memorandum definiti its, proceedings, claims,	cated Investors ("Guidelir set out in Part 1, Schedu on of Sophisticated inves damages, and losses w

\*Domestic Ringgit Borrowing is defined under the Notice 3: Any borrowing in ringgit obtained by a resident from another resident excluding one (1) housing loan and one (1) vehicle loan.

# POLITICALLY EXPOSED PERSON (PEP) DECLARATION

Are/ Were you/and your joint account holder (i) entrusted with any prominent public function such as head of state or government, senior politicians, senior government officials, judicial or military officials, senior executive of state owned corporations and important political party officials in Malaysia or any other country; (ii) entrusted with a prominent function by an international organisation which refers to members of senior management e.g. directors, deputy directors and members of the board or equivalent function ("PEP") or (iii) having any business relationship with a PEP or a PEP's family member/ close associate?

	Name:		Relationship:				
☐ Yes	Country of PEP:		Position Held:				
□ No							
7. BANK	7. BANK REFERENCES OF ACCOUNT HOLDER						
Bank Name							
Account No.							

### Notes:

- Payment to third parties is NOT allowed.

  Bank charges may be applicable for payment of redemption proceeds, and it shall be borne by unit holder.

## **INITIAL INVESTMENT(S)**

Fund Name	Distribution Method	Investment Amount (RM)				
runu Name	Distribution Method	Gross Amount:	Bank Charge:	Total Net Amount:		
☐ Avian Growth Fund	Reinvest (By default)					
☐ Avian Dividend	□ Reinvest					
Fund	□ Payout					

Payable to AVIAN CAPITAL SDN. BHD.						
Payment Method	Payment Method         □ Cashier's Order/ Bank Draft         □ Domestic Transfer         □ Telegraphic Transfer					
Bank Name	Malayan Banking Berhad					
Account No.	514123700587					

### Notes:

- Third party account deposit is strictly prohibited.
- Cash transactions are not accepted.
- All payments made via bank transfer must be made payable to "Avian Capital Sdn. Bhd." and payor's full name as per NRIC/Passport/ID should be stated in the recipients' reference/description of transaction field.
- Please provide payment proof for our verification purposes

## 9. DECLARATION

- 1. I/We have received and read, and fully understood the terms and conditions in this Account Opening Form and the accompanying by the relevant Product Highlight Sheet(s), Information Memorandum(s) and its Supplemental Information Memorandum(s) (if any) of the respective wholesale funds.
- 2. I/We further acknowledged that I/We are aware of the fees and charges and agree of the fees and charges directly or indirectly incurred when investing in this fund.
- 3. I am/We are not acting as a nominee for any undisclosed third party and I/We declare that I am/we are neither engaged in any unlawful activity nor are my/our investment monies invested with the Manager derived from any illegal source or related to any illegal activity as defined by the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 ("AMLATFPUAA").
- 4. I/We confirm that the payment is remitted from my/our own account.
- 5. I/We will promptly inform Avian Capital of any changes to the information provided in this form.
- 6. I/We hereby agree to Avian disclosing information herein to the regulators regarding your account, as may be required, whether pursuant to law or otherwise. Avian shall not be liable whether directly or indirectly to me/us/the entity or any other persons for such disclosure.

Signature		Signature (Joint Holder)			
Name:		Name:			
Date:		Date:			
GENERAL DOCUM	MENT(S) REQUIRED				
	Duly completed and sign	gned Account Opening Form			
	Original sighted*/certifi	ied true copy of Principal Applicant's	NRIC/Passport		
	Original sighted*/certifi	ied true copy of Joint Applicant's NR	RIC/Passport/ Birth Co	ertificate (if applicable	<del>)</del> )
	Duly completed and sign	gned Suitability Assessment Form			
	Payment Proof				
	. aymoner roor				
			<del></del>	<del></del>	

# Staff Name Signature Date Consultant (Distributor / Referral) Remarks Received by Processed and Verified by Approved by

FOR OFFICE USE ONLY

AD	Andorra	CG	Republic of the Congo	GG	Guernsey
AE	United Arab Emirates	СН	Switzerland	GH	Ghana
AF	Afghanistan	CI	Ivory Coast	GI	Gibraltar
AG	Antigua and Barbuda	СК	Cook Islands	GL	Greenland
Al	Anguilla	CL	Chile	GM	Gambia
AL	Albania	СМ	Cameroon	GN	Guinea
AM	Armenia	CN	China	GQ	Equatorial Guinea
AN	Netherlands Antilles	СО	Colombia	GR	Greece
AO	Angola	CR	Costa Rica	GT	Guatemala
AQ	Antarctica	CRN	Crimea Region	GU	Guam
AR	Argentina	CU	Cuba	GW	Guinea-Bissau
AS	American Samoa	CV	Cape Verde	GY	Guyana
AT	Austria	CW	Curacao	HK	Hong Kong
AU	Australia	CX	Christmas Island	HN	Honduras
AW	Aruba	CY	Cyprus	HR	Croatia
AZ	Azerbaijan	CZ	Czech Republic	HT	Haiti
ВА	Bosnia and Herzegovina	DE	Germany	HU	Hungary
BB	Barbados	DJ	Djibouti	ID	Indonesia
BD	Bangladesh	DK	Denmark	IE	Ireland
BE	Belgium	DM	Dominica	IL	Israel
BF	Burkina Faso	DO	Dominican Republic	IM	Isle of Man
BG	Bulgaria	DZ	Algeria	IN	India
вн	Bahrain	EC	Ecuador	Ю	British Indian Ocean Territor
BI	Burundi	EE	Estonia	IQ	Iraq
BJ	Benin	EG	Egypt	IR	Iran
BL	Saint Barthelemy	EH	Western Sahara	IS	Iceland
ВМ	Bermuda	ER	Eritrea	IT	Italy
BN	BRUNEI DARUSSALAM	ES	Spain	JE	Jersey
во	Bolivia	ET	Ethiopia	JM	Jamaica
BR	Brazil	FI	Finland	JO	Jordan
BS	Bahamas	FJ	Fiji	JP	Japan
вт	Bhutan	FK	Falkland Islands	KE	Kenya
BW	Botswana	FM	Micronesia	KG	Kyrgyzstan
BY	Belarus	FO	Faroe Islands	KH	Cambodia
BZ	Belize	FR	France	KI	Kiribati
CA	Canada	GA	Gabon	KM	Comoros
СС	Cocos Islands	GB	United kingdom	KN	Saint Kitts and Nevis
CD	Democratic Republic of the Congo	GD	Grenada	KP	North Korea
CF	Central African Republic	GE	Georgia	KR	Republic of Korea

KW	Kuwait	NI	Nicaragua	SM	San Marino
KY	Cayman Islands	NL	Netherlands	SN	Senegal
KZ	Kazakhstan	NO	Norway	SO	Somalia
LA	Laos	NP	Nepal	SR	Suriname
LB	Lebanon	NR	Nauru	SS	South Sudan
LC	Saint Lucia	NU	Niue	ST	Sao Tome and Principe
LI	Liechtenstein	NZ	New Zealand	SV	El Salvador
LK	Sri Lanka	OM	Oman	SX	Sint Maarten
LR	Liberia	ОТ	OTHERS	SY	Syria
LS	Lesotho	PA	Panama	SZ	Swaziland
LT	Lithuania	PE	Peru	TC	Turks and Caicos Islands
LU	Luxembourg	PF	French Polynesia	TD	Chad
LV	Latvia	PG	Papua New Guinea	TG	Togo
LY	Libya	PH	Philippines	TH	Thailand
MA	Morocco	PK	Pakistan	TJ	Tajikistan
MC	Monaco	PL	Poland	TK	Tokelau
MD	Moldova	PM	Saint Pierre and Miquelon	TL	East Timor
ME	Montenegro	PN	Pitcairn	TM	Turkmenistan
MF	Saint Martin	PR	Puerto Rico	TN	Tunisia
MG	Madagascar	PS	Palestine	ТО	Tonga
MH	Marshall Islands	PT	Portugal	TR	Turkey
MK	Macedonia	PW	Palau	TT	Trinidad and Tobago
ML	Mali	PY	Paraguay	TV	Tuvalu
MM	Myanmar	QA	Qatar	TW	TAIWAN, PROVINCE OF CHINA
MN	Mongolia	RE	Reunion	TZ	Tanzania
МО	Macao	RO	Romania	UA	Ukraine
MP	Northern Mariana Islands	RS	Serbia	UG	Uganda
MR	Mauritania	RU	Russia	US	United States
MS	Montserrat	RW	Rwanda	UY	Uruguay
MT	Malta	SA	Saudi Arabia	UZ	Uzbekistan
MU	Mauritius	SB	Solomon Islands	VA	Vatican
MV	Maldives	SC	Seychelles	VC	Saint Vincent and the Grenadines
MW	Malawi	SD	Sudan	VE	Venezuela
MX	Mexico	SE	Sweden	VG	British Virgin Islands
MY	MALAYSIA	SG	Singapore	VI	U.S. Virgin Islands
MZ	Mozambique	SH	Saint Helena	VN	VIET NAM
NA	Namibia	SI	Slovenia	VU	Vanuatu
NC	New Caledonia	SJ	Svalbard and Jan Mayen	WF	Wallis and Futuna
NE	Niger	SK	Slovakia	WS	Samoa
NG	Nigeria	SL	Sierra Leone	XK	Kosovo

YE	Yemen	ZA	South Africa	ZW	Zimbabwe			
YT	Mayotte	ZM	Zambia					
OCCUPATIO	CUPATION CODE AND DESCRIPTION							
01	HOUSEWIFE, HOMEMAKE	HOUSEWIFE, HOMEMAKER						
02	STUDENT							
03	RETIREE							
04	CLERICAL / ADMIN ASSIST	TANT / ACCOU	NT ASSISTANT					
05	EXECUTIVE							
06	PROFESSION							
07	MANAGEMENT							
08	GOVERNMENT SERVANT							
09	SELF EMPLOYED / BUSIN	ESS SERVANT						
00	OTHERS							
NATURE OF	BUSINESS CODE AND D	ESCRIPTIO	N					
01	AGRICULTURE / FORESTR	RY						
02	MINING / QUARRYING							
03	CONSTRUCTION							
04	INSURANCE							
05	AUDIT, ACCOUNTING, TAX	K, LEGAL FIRM	, COMPANY SECRETARY					
06	FINANCIAL INSTITUTIONS	, CAPITAL MAI	RKET, INSTITUTION / INTERMEDI	ARY				
07	PROPERTY MANAGEMEN	T / REAL ESTA	TE					
08	EDUCATION							
09	HEALTH SERVICES							
10	SERVICE INDUSTRY							
11	FEDERAL OR STATE GOV	ERNMENT, RE	GULATORY AUTHORITY					
12	MONEY SERVICES / CASH	I INCENTIVE B	USINESS					
13	CASINO, BETTING AND O	THER GAMBLI	NG RELATED ACTIVITIES					
14	BUSINESS IN VALUABLES							
15	MANUFACTURERS, DEAL	ERS, INTERME	DIARIES OF ARMAMENT OR WE	APONS RELATE	ED BUSINESS			
16	NGO							
17	MEDIA & TELECOMMUNIC	ATION						
18	FOOD AND BEVERAGES							
19	ENGINEERING							
20	MANUFACTURING							
21	HOTEL / TRAVEL SERVICE							
22		ENTERTAINEMENT OUTLETS						
00	OTHERS	OTHERS						