

Accredited Investor Opt-Out Form (For Existing Accredited Investors)

I/We (the "**Accredited Investor**") confirm that I/we no longer wish to be treated as an accredited investor as defined in section 4A of the SFA in respect of all of my/our transactions with Phillip Securities Pte Ltd ("PSPL") after seven (7) working days from the date of submitting this form.

I/We agree, accept, and understand that in completing, signing, and returning this form to PSPL, PSPL may no longer be able to offer certain investment products to me/us for subscription or purchase. I/We also acknowledge and accept that my/our existing investments with PSPL will not be affected.

Personal Information (For Indivi	iduals)
Please fill in all the fields below if	you are an individual.
Name (as per NRIC/passport)	:
NRIC/Passport Number	:
Signature	Date
Name:	
Personal Information (For Indivi	idual Joint Account Holders)
Please fill in all the fields below if y Investor.	you are an individual that holds a joint account with the Accredited
Name (as per NRIC/passport)	:
NRIC/Passport Number	:
Name of Joint Account Holder (AI)	:
NRIC/Passport Number of Joint Account Holder	:
Account Number	:
Signature	Date
Name:	

Please fill in all the fields below if you rep	•
	resent a corporation.
Unique Identification Number :	
Registered Office Address and Principal Place of Business (if different)	
Place of Incorporation :	
Date of Incorporation :	
Legal Form of Corporation :	
Name of Representative (as per NRIC/Passport)	
NRIC/Passport Number of :	
Position of Representative: :	
Contact Number of :	
Email Address of :	
Signature Date Representative's Name:	Signature Date Representative's Name:
Company Stamp:	
For Official Use Only	
Signature(s)	
Checked by TR/FAR Name:	Processed by [APU] Name:
	Observe FABUR
	Checker [APU] Name: