

## List of Approving Persons – Amendment form

### About this form

This form:

- is **NOT** your mandate – a separate mandate or other evidence acceptable to the Bank of your authority to amend the List of Approving Persons should be provided to us
- will allow you to make certain amendments to the list of Approving Persons which you have previously submitted to the Bank

This List of Approving Persons – Amendment form has four (4) parts:

- (I) **Part A** – Basic Information – the basic details of the Client and the Bank
- (II) **Part B** – Instructions – this section is for your selection on the purpose of the Amendment form
- (III) **Part C** – List of Approving Persons – identify, complete and provide us with the details for each of your Approving Persons
- (IV) **Part D** – Client Authorisation – this section is to be signed by the persons who are authorised to provide us with the details of the Approving Persons

### How to fill in this form

- Please use **BLOCK CAPITALS** to complete this form
- Any field marked with an “\*” must be completed
- Leave boxes blank if they don’t apply to you
- If you make a mistake, please print a fresh page
- If you require to amend more than six (6) Approving Persons or require more space under Additional Instructions, please ask for a List of Approving Persons – Schedule form. The List of Approving Persons – Schedule form should be attached to this form and signed by the relevant persons who are authorised to make amendments to the list of Approving Persons
- Please keep a copy of the completed form for your records

### Guidance Notes to this form

#### A. GENERAL

We may clarify any incomplete or inconsistent information in relation to your request under this form

#### B. PART A – BASIC INFORMATION

- (i) **SCB entity** – you may have more than one relationship with entities under the Standard Chartered Group – please insert the relevant Standard Chartered entity to which you will be submitting this form
- (ii) **Date of this request** – insert the date of your request. This will help us manage your instructions
- (iii) **Client name** – insert your **FULL** legal name. This will help us connect the details under this form to the relevant Client entity
- (iv) **Date of mandate** – insert the date of the Bank’s Mandate which you would like us to make changes to the Approving Persons. This will help us manage your instructions

#### C. PART B – INSTRUCTIONS

- (i) **Replace previous list of Approving Persons** – please select this box if you would like the form to **replace and supersede** all previous list of Approving Persons which you have submitted to us. Please note that if you choose to replace all previous Approving Persons, you may be required to provide the Bank with a new Mandate.
- (ii) **Supplement previous list of Approving Persons** – please select this box if you would like the form to **amend and supplement** the previous list of Approving Persons which you have submitted to us

#### D. PART C – LIST OF APPROVING PERSONS

- (i) **Approving Persons** – These are persons who are authorised to act on your behalf in accordance with the mandate. Note that the Approving Persons are an “*Authorised Person*” (as defined under our Standard Terms, General Banking Terms and Conditions or equivalent) or an equivalent person. You will need to provide us the relevant details of the Approving Persons (including their specimen signature, identity information and other related information as required by the Bank) as part of our set-up of the authorised persons in our systems
- (ii) **Additional Instructions** – You may include additional instructions applicable to Approving Persons under this section. Some examples include:

- Deletion of Approving Person(s):

The following persons are no longer nominated as Approving Persons. Please delete their specimen signatur

Name
(a) [insert name]

- Signing instructions:

Any [2] Approving Persons are required to jointly: (i) [execute the Documents]; (ii) [provide instructions, notices or other directions to the Bank]; (iii) [carry out the purpose and intent of any foregoing resolution for and on behalf of the Client]; (iv) [etc.]

➤ Accounts:

The Approving Persons listed below shall have the authority to handle the following accounts for the Client:

Account Number	Currency	Account name	Approving Person(s)

➤ Limitations to the power and authority of the Approving Persons:

The Approving Persons listed below shall be limited to the following power, authority or limits:

Name:	Power, Authority and \$ limit
<i>[example: John Adams]</i>	<i>[example: operating the bank accounts of any type with the Bank up to USD1 million per transaction]</i>

**provided** that each Approving Person shall retain the full power and authority to appoint any person, representative or agent to act for an on behalf of the Client in connection with the Straight2Bank services (including full and unrestricted powers to administer, manage and appoint users for the Straight2Bank services)

**IMPORTANT NOTE:**

1. **Limitations** – any limitations which you impose on an Approving Person may potentially impact our product functionalities.
2. **Straight2Bank set-up** – For Straight2Bank, you will need to submit to us a completed and signed Straight2Bank Setup & Maintenance Form. In that form, you will need to appoint users and set, assign and amend the applicable approving powers and authorisation limits; if you subsequently wish to make changes, you will need to submit to us a new Straight2Bank Setup & Maintenance Form (where system functionality permits, these may also be done through your designated administrator(s)). It is your responsibility to ensure that Straight2Bank Setup & Maintenance Forms submitted by you do not conflict with any additional instructions given in this form.

**E. PART D – CLIENT AUTHORISATION**

- (i) **Signatory on this Mandate Amendment form** – This Amendment form is to be signed by the person(s) who are approved to provide us with the details of the Approving Persons in accordance with the Bank's Mandate.

***We would strongly suggest that you discuss any proposed limitations with the bank before including these under the Additional Instructions section***

## List of Approving Persons – Amendment form

### Part A – Basic Information

To* <i>(Insert the name of the SCB entity providing the service) (the “Bank”)</i>	Standard Chartered Bank (Vietnam) Limited
Date of this request*	
Name of the Company/ Institution/ Partnership / Enterprise ( (the “Client”))* <i>(Insert FULL legal name)</i>	
Date of the Bank’s mandate (the “Bank’s Mandate”)*	

### Part B – Instructions

We hereby provide the Bank with an updated list of Approving Persons for the Client in relation to the Bank’s Mandate

*(Please select one only)\**

- This list shall **replace and supersede all previous list** of Approving Persons submitted to the Bank
- This list shall **amend and supplement the previous list** of Approving Persons submitted to the Bank

The Bank may correct or clarify any incomplete or inconsistent instructions in relation to this request. Any terms used in this request which are not defined, shall have the same meaning given to them in the Bank’s Mandate

## Part C – List of Approving Persons

Please select one

Any one to sign

Any two to sign

Other (insert details below)

If you tick "Other", describe the alternative method of operation in the Additional Instructions area below.

### GROUP A – APPROVING PERSON(S) FOR APPROVED TRANSACTIONS

(act as account's holder representative and our Approving Persons for Approved Transactions)

Full name

Title / Position within the Client

DOB

Nationality

ID/ Passport

or Visa/TR Card (applied for foreigner)

Date of issue

Place of issue

Contact Details

Permanent registered address

Current registered address

Email

Signature – please ensure signature remains within the box

Full name

Title / Position within the Client

DOB

Nationality

ID/ Passport

or Visa/TR Card (applied for foreigner)

Date of issue

Place of issue

Contact Details

Permanent registered address

Current registered address

Email

Signature – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

**GROUP B – CHIEF ACCOUNTANT (PERSON IN CHARGE OF ACCOUNTING) AND OR HIS/HER AUTHORISED PERSON**

Full name

Title / Position within the Client

DOB

Nationality

ID/ Passport

or Visa/TR Card (applied for foreigner)

Date of issue

Place of issue

Contact Details

Permanent registered address

Current registered address

Email

**Signature** – please ensure signature remains within the box

Full name

Title / Position within the Client

DOB

Nationality

ID/ Passport

or Visa/TR Card (applied for foreigner)

Date of issue

Place of issue

Contact Details

Permanent registered address

Current registered address

Email

**Signature** – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box



**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

**Full name**

**Title / Position within the Client**

**DOB**

**Nationality**

**ID/ Passport**

**or Visa/TR Card (applied for foreigner)**

**Date of issue**

**Place of issue**

**Contact Details**

**Permanent registered address**

**Current registered address**

**Email**

**Signature** – please ensure signature remains within the box

I, the under-signed, the Company's chief accountant / person in charge of accounting function, hereby authorises each person appointed in this Group B to sign onto any accounting vouchers in operation of Company's account(s) jointly with the account holder's representative or any one in Group A. It is further confirmed that each person appointed above accepts acting as an Authorised Person of the chief accountant / person in charge of accounting function<sup>1</sup>.

Full Name

Chief Accountant (person in charge of accounting function)

(Sign)

## Additional Instructions

### Notes:

(a) Please give details of any additional instructions applicable to the Approving Persons

(b) **IMPORTANT NOTE**

- (1) any limitations which you impose on an Approving Person may impact our product functionalities. For Straight2Bank, you will need to submit to us a completed and signed Straight2Bank Setup & Maintenance Form. In that form, you will need to appoint users and set, assign and amend the applicable approving powers and authorisation limits; if you subsequently wish to make changes, you will need to submit to us a new Straight2Bank Setup & Maintenance Form (where system functionality permits, these may also be done through your designated administrator(s)). It is your responsibility to ensure that Straight2Bank Setup & Maintenance Forms submitted by you do not conflict with any additional instructions given here.
- (2) Given that this Mandate governs account activities of the Client, please be informed that:
  - The laws require that any account unit must register information of its head of accounting unit / chief accountant with bank, and that any accounting voucher in relation to account usage and operation must be jointly signed by the account holder's representative (or its delegated person) AND the head of accounting unit / chief accountant (or its delegated person).
  - The Client is recommended to register its account's holder representative and the head of accounting unit / chief accountant as Approving Person to the Bank under this Mandate form to comply with the above regulations. **A person can't be registered as an authorised person of the account holder's representative and the head of accounting unit / chief accountant at the same time.**
  - The account's holder representative is the Client's Legal Representative or authorized person (under a power of authorization or equivalent documents).
  - the requirements for joint signing the account holder's representative (or its delegated person) AND the head of accounting unit / chief accountant (or its delegated person) as stated above are only applied for account usage and operation.  
Means the Authorised Person(s) of Chief Accountant as mentioned in Group B shall only be required for involvement in account usage and operation, unless you differently expressly instruct the Bank.
- (3) Any delegation/ authorization/ designation related to or mentioned in this Mandate, unless waived by the Bank, is to be provided by the Client to the Bank.
- (4) For other transactions rather than account usage and operation, it is by default that any Approving Persons under Group A (i.e. Approving Persons for Approved Transactions) can complete, execute, deliver and amend transactions set out in the mandate.

<sup>1</sup> The Confirmation of the Company's chief accountant / person in charge of accounting function is required when this Schedule form is used as a General List of Approving Persons – where you have your own mandate.

## Part D – Client Authorisation

I/We affirm that the above to be the true and accurate details (including specimen signatures) of Approving Persons provided by the Client

Date of this Authorisation\*

### CLIENT SIGNATURE(S)

#### Primary Signatory\*

Full name

Title / Position with Client

**Signature and seal** – please ensure signature remains within the box

#### Secondary Signatory (if required)

Full name

Title / Position with Client

**Signature** – please ensure signature remains within the box