



Please Affix Passport Photograph

# CUSTOMER DATA SHEET

## Customer Information

Customer Name: \_\_\_\_\_ (Full Name of Applicant)

Home Address: \_\_\_\_\_

Nearest Bus-Stop/ Landmark: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Identification: \_\_\_\_\_ Utility Bill: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please Attach Clear Copies)

Telephone #(s): \_\_\_\_\_ E-mail: \_\_\_\_\_

Next of Kin: Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

## Business Information

Name of Company: \_\_\_\_\_ RC/BN No: \_\_\_\_\_

Current Office Address: \_\_\_\_\_

Nearest Bus-Stop/ Landmark: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Telephone #(s): \_\_\_\_\_ E-mail: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

### Directors/Promoters Information (Please include Home)

Name			
Home Address			
Telephone#			

Name of Companies with current relationship (Contractee): \_\_\_\_\_

Anticipated Monthly Facility Request: \_\_\_\_\_

Bankers: \_\_\_\_\_

Security to be pledged: \_\_\_\_\_

Equity contribution for transaction: \_\_\_\_\_

## Referee Information

Customer Name: \_\_\_\_\_  
(Please submit clear copy of identification)

Occupation: \_\_\_\_\_

Home Address: \_\_\_\_\_

Nearest Bus-Stop/ Landmark: \_\_\_\_\_

Identification: \_\_\_\_\_ Utility Bill: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please Attach Clear Copies)

Telephone #(s): \_\_\_\_\_ E-mail: \_\_\_\_\_

How did you hear about Co-Link Inv. Mgt. Co. Ltd.?

**Signature**

**Thumb Print**

**Date**

\_\_\_\_\_

\_\_\_\_\_

# For Office Use Only

(This form **must** be reviewed bi-annually or annually as required)

## Other Requirements

All original Copies of the under listed must be sighted while copies submitted must be endorsed by the Credit Officer.

## Means of Identification

* International Passport	<input type="checkbox"/>
* National Identity Card	<input type="checkbox"/>
* Drivers Licence	<input type="checkbox"/>
Memo & Article of Association:	<input type="checkbox"/>
Form C07 – Directors Particulars	<input type="checkbox"/>
Form C02 – Allotment of Shares	<input type="checkbox"/>
Form 1 & 2 of Registration (Where Applicable)	<input type="checkbox"/>
Certificate of Registration	<input type="checkbox"/>
Application for Loan	<input type="checkbox"/>
Passport Photograph	<input type="checkbox"/>
Utility Bill _____ (Please Specify)	<input type="checkbox"/>
Cash Flow Statement	<input type="checkbox"/>
Bank Statement(s)	<input type="checkbox"/>
3 years Audited Account of the Company	<input type="checkbox"/>
Certificate of Occupancy	<input type="checkbox"/>
Deed of Assignment	<input type="checkbox"/>
Form 1C	<input type="checkbox"/>

Others \_\_\_\_\_

Observation/ Comment \_\_\_\_\_

\_\_\_\_\_

Name of Officer

Date

\_\_\_\_\_

\_\_\_\_\_