

This checklist shall be completed to the best of the representative's knowledge.

Money Laundering Risk Profiling Checklist (MLRPC) for Individual Client

Client Name: _____

Note: This section sets out the factors to assess the level of risk. However, dealer's representative's / staff are expected to also consider any other factors which may be relevant to a particular client to assess the level of risk.

S/No.	Risk Factors	Question	Answer	
			YES	NO
1.	Origin of the client & location of business / transaction	a) Is the client a resident of a "High Risk" country?	<input type="checkbox"/>	<input type="checkbox"/>
		b) Does the location of client's business and/or transaction reside in a "High Risk" country? <i>(Please refer to Attachment A for "High Risk" country)</i>	<input type="checkbox"/>	<input type="checkbox"/>
		If yes, please specify:		
2.	Background / profile of the client	a) Does the client fall under high net worth category?	<input type="checkbox"/>	<input type="checkbox"/>
		b) Is the client listed or linked to any PEPs?	<input type="checkbox"/>	<input type="checkbox"/>
		c) Is the client listed or linked to the individuals who are listed on the UN Blocked List or any other blacklisted list as published by any local regulator? <i>(Please refer Attachment B for "High Net Worth Individuals", "PEPs" and "Blacklisted List")</i>	<input type="checkbox"/>	<input type="checkbox"/>
		If yes, please specify (for PEP, pls specify whether foreign/domestic or persons entrusted with prominent function by an international organisation):		
3.	Nature of client's business / employment	Does the client's business/employment fall under the "High Risk" business category? <i>(Please refer to Attachment C for "High Risk" business)</i>	<input type="checkbox"/>	<input type="checkbox"/>
		If yes, please specify:		
4.	Product / service type	Does the product / service fall under the "High Risk" category based on Group's entities risk profiling? <i>(Please refer to Attachments D and D(a) for "High Risk" products / services)</i>	<input type="checkbox"/>	<input type="checkbox"/>
		If yes, please specify:		
5.	Legal arrangements	Is the client using legal arrangements that are complex? e.g. trustee / proxy / nominee?	<input type="checkbox"/>	<input type="checkbox"/>
		If yes, please identify and specify the structure and the beneficial owner controlling the arrangement:		

S/No.	Risk Factors	Question	Answer	
			YES	NO
<u>CONCLUSION:</u>				
<ul style="list-style-type: none">• If one of the answer to the question 1 to 5 above is “YES”, treat as Higher risk client and obtain information / documents as applicable to the High risk rating.*• For domestic PEPs or persons entrusted with a prominent function by an international organisation, business units are required to assess the level of ML/TF risk posed by the business relationship with the domestic PEP or person entrusted with a prominent function by an international organisation.• If all the answers to questions 1 to 5 above are “NO”, and : -<ul style="list-style-type: none">a) The DRs / staff have other information that may suggest that the client is of higher risk, treat as higher risk client and obtain information / documents as applicable to the High risk rating.*b) The DRs / staff have no other information that may suggest that the client is of higher risk, treat as lower risk client and obtain information / documents as applicable to the Low risk rating.			<div>Risk rating:</div> <div>Low risk</div> <div><input type="checkbox"/></div> <div>High risk</div> <div><input type="checkbox"/></div>	

<p><u>*NOTE:</u></p> <p>Based on the above conclusion, if the representative's view that the High risk rating client should not be rated as High Risk, please complete the remarks column below:-</p>
<p><u>REMARKS:</u></p> <p>(Please state reason / justification, mitigating steps taken / have yet and are intended to be taken, target timeline, action by and etc).</p>

Name

Designation

Signature

Date

Prepared by:

**(to be completed by
representative)**

Reviewed by:
**(to be completed by
Operations
Department)**

FOR HIGH RISK CLIENT, PLEASE COMPLETE THE ENHANCED DUE DILIGENCE TEMPLATE.