

# Resolution for Use of Channels of a

Limited Company

Partnership

Registered Society,  
Club or Association

Customer Name [REDACTED]		Incorporated in Registered in [REDACTED] Established in [REDACTED]	Certified true and accurate
[REDACTED]		Company No. Registration No.	
Extract of Minutes of	Board Meeting Partnership Meeting Governing Body Meeting	held on [REDACTED]	
Directors' Circular Resolution passed pursuant to Article [REDACTED]		of the Company's Articles of Association	

It is hereby resolved that:

## CHANNELS

1. Approval be and is hereby given for the [REDACTED] to use the services and delivery channels (such as internet banking, telephone banking, ATM cards, SMS alerts) to operate the accounts opened with **HSBC Bank Malaysia Berhad** ("the Bank") subject to all the Bank's generic and specific terms and conditions and such amendments thereto as the Bank may impose from time to time;

## AUTHORISED PERSONS TO SIGN FORMS & DOCUMENTS

2. Authority be and is hereby given to <sup>1</sup>\_\_\_\_\_ to sign the application form(s), name and vary the users of the said services and delivery channels (such users need not be the authorised account signatories and usage of the said services and delivery channels need not be consistent with any authorised limits and/or mode of operation otherwise applicable to the account concerned) and further sign all other relevant agreements, indemnities, documents, forms, notices and authorisations in relation to the said services and delivery channels for and on behalf of the [REDACTED];
3. AND THAT a copy of these resolutions certified as true copy by the [REDACTED] be delivered to the Bank and remain in force in respect of usage of the said services and delivery channels (without superseding and notwithstanding any conflict with the earlier resolutions relating to the accounts) until an amending resolution shall have been passed and a copy of such amending resolution certified as true by the [REDACTED] shall have been received by the Bank, and until receipt of the same, the Bank shall be entitled to rely and act upon these resolutions.

<sup>1</sup> (i) Insert a particular number of Director(s) / Partner(s) / Office-Bearer(s) (whichever is applicable) or (ii) insert full name(s) and designation(s). (A certificate of specimen signatures marked "Appendix A" is required if option (i) is selected.) (A certificate of specimen signatures marked "Appendix B" is required if option (ii) is selected.)

**Certificate of**

**Specimen Signatures**

<sup>2</sup>APPENDIX A

1.	Name _____	NRIC/Passport _____	Specimen Signature _____
2.	Name _____	NRIC/Passport _____	Specimen Signature _____
3.	Name _____	NRIC/Passport _____	Specimen Signature _____
4.	Name _____	NRIC/Passport _____	Specimen Signature _____
5.	Name _____	NRIC/Passport _____	Specimen Signature _____
6.	Name _____	NRIC/Passport _____	Specimen Signature _____
7.	Name _____	NRIC/Passport _____	Specimen Signature _____
8.	Name _____	NRIC/Passport _____	Specimen Signature _____
9.	Name _____	NRIC/Passport _____	Specimen Signature _____
10.	Name _____	NRIC/Passport _____	Specimen Signature _____

I, \_\_\_\_\_  
 the \_\_\_\_\_ of \_\_\_\_\_  
 ("\_\_\_\_\_") hereby certify that the above is a complete list of the current  
 \_\_\_\_\_ of the \_\_\_\_\_ together with their respective specimen signatures.  
 I undertake to notify the Bank in writing in the event of any changes to the above as  
 long as the \_\_\_\_\_ has an account with the Bank, and until the receipt of such  
 notification, the Bank is entitled to rely on the above.

Signed by     Date
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<sup>2</sup> Please refer to paragraph 2 of the resolutions and footnote 1 on previous page. Appendix A is to be completed only if paragraph 2 of the resolutions is completed by reference to a particular number of Director(s) / Partner(s) / Office-Bearer(s) (whichever is applicable).

# Certificate of Specimen Signatures

1.	Name _____	NRIC/Passport _____	Specimen Signature _____
2.	Name _____	NRIC/Passport _____	Specimen Signature _____
3.	Name _____	NRIC/Passport _____	Specimen Signature _____
4.	Name _____	NRIC/Passport _____	Specimen Signature _____
5.	Name _____	NRIC/Passport _____	Specimen Signature _____
6.	Name _____	NRIC/Passport _____	Specimen Signature _____
7.	Name _____	NRIC/Passport _____	Specimen Signature _____
8.	Name _____	NRIC/Passport _____	Specimen Signature _____
9.	Name _____	NRIC/Passport _____	Specimen Signature _____
10.	Name _____	NRIC/Passport _____	Specimen Signature _____

I, \_\_\_\_\_ of \_\_\_\_\_ hereby certify that the above is a complete list of the specimen signatures of the authorised person(s) name in the Resolution dated (date).

SIGNED BY	
DATE	

<sup>3</sup> Please refer to paragraph 2 of the resolutions and footnote 1 on previous page. Appendix B is to be completed only if paragraph 2 of the resolutions is completed by naming specific Director(s) / Partner(s) / Office-Bearer(s) (whichever is applicable) and / or specific person(s).