



# INDEMNITY FORM FOR JOINT BANK ACCOUNT

I, \_\_\_\_\_ (NRIC No. \_\_\_\_\_),

hereby confirm and acknowledge that: -

1. FSMOne as the online distribution platform of iFAST Capital Sdn. Bhd. ("iFAST") will not accept and process transactions funded by third parties ("Third Party Payment") with unacceptable relationships, i.e. non-immediate family members;
2. The third-party payer(s) have no trading authority and/or control over my account;
3. Third Party Payment will be subject to further verification by iFAST and this may result in a delay in trade execution; and
4. I undertake to indemnify iFAST, its directors, officers and shareholders against all cost, claims, expenses, fees, liabilities, penalties, suits and/or damages incurred by iFAST arising out of and/or in connection with the Third-Party Payment.

## ACCOUNT HOLDER

Name (as per NRIC/Passport No.)

NRIC / Passport No.

FSMOne Account No.

Date

## INFORMATION OF JOINT BANK ACCOUNT HOLDER

Name(s) on Joint Bank Account  
(as per NRIC/Passport No.)

NRIC / Passport No.

Nationality

Residential Address

Contact Number (Mobile)

Relationship with Account Holder

\* The account holder **must provide a copy of the Joint Bank Account Statement**, along with the necessary supporting documents as outlined in the '**List of Supporting Documents**' to verify the relationship.

Spouse

Parent

Children

Purpose of payment

\*Please provide reason for the third-party funding

Pay for Spouse Investment

Pay for Parent Investment

Pay for Children Investment

I hereby declare and warrant that the information and supporting document submitted to you are complete, true and accurate and that I have not willfully withheld any material fact/information. I understand that iFAST may, in its absolute discretion, request additional and relevant supporting information/documents from the third-party payer(s) or myself when there is any doubt about the information and supporting document provided herein; and this Third-Party Payment Indemnity Form must be submitted together with transaction form and payment proof documents to iFAST. Failure to do so may lead to delay in processing the transaction and the payment shall be refunded to the third-party payer. If there are any changes to this indemnity form, I will immediately inform iFAST.

Account Holder Name & Signature:

Date:

Payer Name and Signature:

Date:

## LIST OF SUPPORTING DOCUMENTS

### RELATIONSHIP

### SUPPORTING DOCUMENTS

Spouse

Marriage Certificate

Parent

Birth Certificate

Children

Birth Certificate