



ECM FORM
(FORM 2A - FORWARD EXCHANGE CONTRACT)

Pengarah
Jabatan Pentadbiran Pertukaran Asing
Bank Negara Malaysia
Jalan Dato' Onn
50480 Kuala Lumpur.
Fax No: +603-26943991/26937732
Website : <http://www.bnm.gov.my/>

Please fill in where applicable and tick (✓) where appropriate

Submission by applicant seeking approval / registration

Submission on behalf of the applicant (third party)

Checklist For Submission of Application:

(Please tick in the box)

	Latest audited annual accounts and management accounts (If not submitted previously)
	Latest form 49 (If not submitted or has changed previously)
	Latest form 24 (If not submitted previously)
	Supporting documents (whenever applicable)

Please ensure that the above documents of the applicant and its ultimate holding company (if applicant is a member of a corporate group in Malaysia) are submitted together with the completed application form.

Authorised Signatory:

Name:

Designation & Department:

Date:

Company Stamp

1.	PARTICULARS OF APPLICANT
Name of applicant	
<u>For resident:</u> Business registration/NRIC no.	
<u>For non-resident:</u> Passport no. Nationality	
Registered address Correspondence address (If different from above) Contact person Designation Telephone no. Facsimile no. E-mail address	
Principal business activity/occupation of applicant (for company, base on information as contained in the audited account)	

<p>Basic Group</p>	<p><input type="checkbox"/> Individual</p> <p><input type="checkbox"/> Sole Proprietor</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Professional Body (such as lawyers, doctors, accountants who are not registered with Suruhanjaya Syarikat Malaysia)</p> <p><input type="checkbox"/> Company</p> <p>For a resident company, please also indicate the controlling status:</p> <p><input type="checkbox"/> Resident Controlled Company (RCC)</p> <p><input type="checkbox"/> Non-Resident Controlled Company (NRCC)</p> <p><input type="checkbox"/> Federal/General Government (include embassies)</p> <p><input type="checkbox"/> State Government</p> <p><input type="checkbox"/> Local Government</p> <p><input type="checkbox"/> Statutory Body</p> <p><input type="checkbox"/> Trade Union</p> <p><input type="checkbox"/> Co-operative</p> <p><input type="checkbox"/> Society / Association</p> <p><input type="checkbox"/> International Organisation</p> <p><input type="checkbox"/> Foundation</p> <p><input type="checkbox"/> Others</p>
--------------------	---

Details of third party (for application submitted on behalf of applicant)

<p>Name of Company / Individual</p> <p>Correspondence Address</p> <p>Contact person</p> <p>Designation</p> <p>Telephone no.</p> <p>Facsimile no.</p> <p>E-mail address</p>	
---	--

**FORWARD EXCHANGE CONTRACT
(ECM 2)**

2.	DETAILS OF FORWARD EXCHANGE CONTRACT																												
Type	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Outright forward Swap Option Others (please specify.....)																											
Purpose (i) Capital/services Inflow and Outflow <div style="text-align:center;">Forward contract for capital/services inflows</div> <input type="checkbox"/> a) Proceeds from permitted offshore loan draw down <input type="checkbox"/> b) Proceeds from the sale of investment abroad <input type="checkbox"/> c) Proceeds from capital injection <input type="checkbox"/> d) Loan repayment from non-resident <input type="checkbox"/> e) Others (e.g., service contract), please specify and attach documentary evidence(s) _____ <div style="text-align:center;">Forward contract for capital/services outflows</div> <input type="checkbox"/> f) Offshore loan repayment or interest payment for foreign currency loan <input type="checkbox"/> g) Permitted investment abroad <input type="checkbox"/> h) Permitted loan extension to non-resident <input type="checkbox"/> i) Others (e.g., service contract) – please specify and attach documentary evidence(s) _____			Approval ID (If applicable)																										
(ii) Trade <input type="checkbox"/> j) Forward contracts for anticipatory export receipts <input type="checkbox"/> k) Forward contracts for anticipatory import payments <input type="checkbox"/> l) Forward contract exceeding the general permissible period, please provide details in the table below: Details of trade contract (where applicable):																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:20%;">Contract/Invoice number</th> <th style="width:20%;">Date of contract/invoice</th> <th style="width:20%;">Expected date of shipment</th> <th style="width:20%;">Expected payment date</th> <th style="width:20%;">Foreign currency amount</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					Contract/Invoice number	Date of contract/invoice	Expected date of shipment	Expected payment date	Foreign currency amount																				
Contract/Invoice number	Date of contract/invoice	Expected date of shipment	Expected payment date	Foreign currency amount																									

Note: Please provide actual sales/purchases for the past 6 months and forecasted sales/purchases for the next 6 months, and the relevant documentary evidence. (To be completed if applicant is applying for ii (j) or ii (k))						
Past 6 Months		Receivables		Payables		
Month/Year (mm/yyyy)	Currency	Amount (RM equivalent)	Currency	Amount (RM equivalent)		
Total						
Future forecasted		Receivables		Payables		
Month/Year (mm/yyyy)	Currency	Amount (RM equivalent)	Currency	Amount (RM equivalent)		
Total						
(iii) Reason(s) for hedging						
(iv) Currency, amount and tenure applied for hedging	Purpose	Currency to be sold		Currency to be purchased		Tenure (no. of months)
		Currency	Amount	Currency	Amount	
	i(a)					
	i(b)					
	i(c)					
	i(d)					
	i(e)					
	i(f)					
i(g)						

	i(h)					
	i(i)					
	ii(j)					
	ii(k)					
	ii(l)					

(v) Hedging counter-party	<p>Name of bank :</p> <p>Location/country:</p> <p>(Please provide reasons if the hedging is not to be done with an authorised dealer in Malaysia)</p> <p>.....</p> <p>.....</p> <p>.....</p>
---------------------------	--

3.	ADDITIONAL INFORMATION TO SUPPORT THE APPLICATION
-----------	--

--	--