

Bank Issued Product

6-Month RMB Structured Investment Product Order Form

To: DBS Bank (China) Limited (the "Bank", which expression shall include its successors and/or assigns)

Product Code FZLD

/\	I/We would like to place an Order for Structured Investment Product (the "SIP") with details as follows: Customer and SIP Details						
[Name(s) Account No. (Must be an Account with the Bank)						
	ID Type ID No.						
Offer Amount (RMB) Offer Amount in Capital Letter (RMB) *The permissible Offer Amount of the SIP is in integral multiples of RMB 5,000, subject to a minimum of RMB 50,000.							
	Closing Date of OfferValue Date22 September 2023 (3:30 p.m, Beijing Time)26 September 2023						
	Notes						
1.	Terms used herein without definition shall have the meaning given to them under the SIP Documents provided by the Bank which includes but not limited to terms and conditions applicable to Structured Investment Product (the "SIP Terms and Conditions"), Customer Rights Instruction, and the SIP Term Sheet, Risk Disclosure Statement, SIP Confirmation, Terms and Conditions for Accounts and Related Services for Individual and other related documents that determined by the Bank from time to time. This Order Form is governed by the SIP Sales Documents.						
2.	Once this Order Form is submitted, the Customer may cancel the investment before Cancellation of Investment Deadline by giving the Bank notice in a form and on the terms prescribed by the Bank in its sole discretion. If the Customer has not cancelled the investment in this SIP, the Bank may decide whether to accept the subscription for the investment after the Cancellation of Investment Deadline. Upon						
3.	The Bank is irrevocably authorized to deduct the Offer Amount (or part thereof, as the case may be) from the above Customer(s)' designated account on the Value Date and the Bank is not required to further confirm with the Customer(s) on or before such deduction. From the date when the Bank receives this Order Form to the Value Date (both dates inclusive), the Offer Amount in the above designated account will be frozen for ordering of the SIP.						
4.	Principal Amount and any return or payout on the SIP (if any) will be credited to the above designated account upon maturity of this SIP or where this SIP is early terminated by the Bank in accordance with the SIP Documents.						

Risk Disclosure Statements and Customer Acknowledgements

(a) I/We understand that the SIP is a structured deposit that carries risks not normally associated with ordinary bank deposits. I/We understand that I/we can receive 100% of the Principal Amount only if the SIP is held by me/us to the Maturity Date and the Bank does not exercise its right to early terminate the SIP pursuant to Section 11 of the SIP Terms and Conditions.

I/We understand that this SIP involves investment risks and I/we can only obtain the proceeds (if any) expressly provided under the SIP Documents. I / We have carefully read the SIP Term Sheet and the Risk
(b) Disclosure Statement, understand characteristics and investment risks of this SIP, and based on my / our own judgment (and opinions provided by my / our independent consultants as we deem appropriate), I/we believe that the SIP is a product suitable for my / our risk tolerance, financial situation and



Bank Issued Product

cenario i	lin						
investment objectives; I/We have assessed, in particular, the risk described in the worst case scenario in the SIP Term Sheet, and I/we have ascertained that we are able to assume, deal with and account for the							
	lo						
alize upor							
etion) wil	(c) a withdrawal prior to the Maturity Date (if allowed by the Bank at its sole and absolute discre- usually be substantially less than 100% of the Principal Amount;						
er to make							
e a loss oi	• •						
nds (rathe							
regulation							
resent and	wi						
ndertake to	(e) _{wa}						
tations and	in						
	wa						
plication	• •						
s as may							
r all risks							
hich I/we							
due to with o							
/ out any							
etation of							
	th						
in PRC fo							
. I/We sha	((1))						
ncorrect o	u						
	line						
e under the							
Europear	(n) 16 Ec						
S citizen o							
laws ("US							
JS Person							
Person.							
the above							
e at its sole	ur ur						
notice no							
terminatio							
nk shall no							
ending the	ta I/V						
el through							
hall inquire							
selves, and							
of the SIF							
mer Righ							
5	In						
el hal sel\ of	I/V sta ele (j) re ma						



I/We confirm I/we have received the SIP Term Sheet, the Customer Rights Instruction, the Structured Investment Product Risk Disclosure Statement (the "Risk Disclosure Statement") and the SIP Terms and Conditions provided by the Bank before I/we sign this Order Form. I/We have read, understood and accepted all the terms and conditions plus the risk disclosures as set out in this Order Form, the SIP Term Sheet, the Customer Rights Instruction, the Structured Investment Product Risk Disclosure Statement (the "Risk Disclosure Statement") and the SIP Terms and Conditions, and I/we fully understand and am/are willing to accept and assume the risks associated with the SIP, including but not limited to the risks highlighted in the SIP Term Sheet and the Risk Disclosure Statement. I/We also confirm that the Bank (including sales of the Bank) is not advising me/us and has not given me/us any assurance or guarantee as to the expected outcome of my/our investment in the SIP (no matter orally or in writing).

Date

For Bank Use Only								
Customer qualification check								
T&C Sign-off Re tick): □ 1 st sign off record		Sole AccountJoint Account	□ CIF:	 Supervisor Call This Time (Fill below Grey part if yes) Effective Supervisor Call 				
Time of Supervi	isor Call:	Extension:	Name of Supervisor:	Initial:				
Return mail customer Dormant Account Resident Customer FATCA FATCA								
□ Order placed in subbranch □ Order placed by phone			Customer Risk Rating :					
For orders placed by phone								
Time of call initia (YYYY-MM-DD	•	er (for phone order)	Customer call number:	Ext No.:				
Call back condu Reason for call	back: 🛛 🗆 Requ	□ No ired by initial call	Name of call back Staff: Call to No.:	Ext No.: Initial:				
Nicelog checke Date:	d by (staff name):	Initial:					
For all orders								
Time of Staff Handling:	RM 1bank ID:	Place:	Name of Handling Staff:	Initial:				
CIF No.	 New Fund Existing Fund 	Handling Sub-branch Code:	Whole Documents Checked By: Date:					
For 大额交易								
DOA 签字			日终交易审核主管签字					