

**12-Month USD Structured Investment Product Order Form**

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

Product Code FZPO

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 (USD)****Offer Amount in Capital Letter (USD)*****\*The permissible Offer Amount of the SIP is in integral multiples of USD 1,000, subject to a minimum of USD 10,000.*****Closing Date of Offer**13 August 2026  
(3:30 p.m, Beijing  
Time)**Value Date**

17 August 2026

**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 acceptance of the Offer Amount (or part thereof, as the case may be) by the Bank, both parties are deemed to have entered into the SIP transaction as of the Value Date (refer to the SIP Term Sheet) and the Bank is not required to notify the Customer(s) on or before such acceptance. In such event, the Principal Amount (means the Offer Amount accepted by the Bank or part thereof, as the case maybe) will be specified in the SIP Confirmation.
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.
- (b) 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 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

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|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | <b>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 losses and/or opportunity cost I/we may incur in such worst case scenario;</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>(c)</b> | <b>I/We understand that I/we should intend to hold the SIP to maturity. The amount that I/we will realize upon a withdrawal prior to the Maturity Date (if allowed by the Bank at its sole and absolute discretion) will usually be substantially less than 100% of the Principal Amount;</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>(d)</b> | I/We understand that if I/we convert amounts from another currency into Settlement Currency in order to make the investment in this SIP, I/we should bear in mind the risk of exchange rate fluctuation that may cause a loss on conversion of the Settlement Currency back into such other currency;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>(e)</b> | I/We represent and warrant to the Bank that the amounts I/we will invest in this SIP are my/our own funds (rather than funds collected from other parties), and that the sources of fund comply with relevant laws and regulations without any possible restriction or defect that may arise from third party claims. I/We hereby represent and warrant to the Bank in the terms set out in Clause 8.1(a) to (g) of the SIP Terms and Conditions and undertake to indemnify the Bank as set out in Clause 8.2 of the SIP Terms and Conditions if any of my/our representations and warranties are untrue or cease to be true; and                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>(f)</b> | <b>I/We understand and agree that, if I/we choose to submit the subscription application, cancellation application or early withdrawal application by phone or such other means as may be accepted by the Bank in its sole discretion ("Remote Instructions"), I/we shall bear all risks arising from the Remote Instructions and the Bank shall not be liable for any loss which I/we may incur thereby, including, but not limited to, any loss suffered by me/us due to misunderstandings, error, failure or breakdown in any equipment or interference with or interception of any transmission. The Bank is entitled, at its sole discretion, to carry out any Remote Instructions it receives according to its understanding and the Bank's interpretation of the Remote Instructions shall be binding and conclusive on me/us.</b>                                                                                                                                                                                                                                            |
| <b>(g)</b> | (Applicable to non-PRC residents) I/We hereby represent to the Bank that I/we have worked/lived in PRC for equal to or more than 1 year and the source of the fund I/we will invest in this SIP is on-shore income. I/We shall undertake all relevant liabilities and fully indemnify the Bank if the above representation is untrue, incorrect or incomplete.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>(h)</b> | I/we confirm that I/we is/are not a retail investor in the European Economic Area as provided under the under the Term Sheet. I/We agree that the Bank accepts no liability if I/we who's qualified as retail investor in the European Economic Area (the "EEA") subscribes the product.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>(i)</b> | I/We acknowledge and understand that this SIP will not be sold to any United States ("US") person, US citizen or US resident, which may fall under the US securities, revenue or tax related laws or other applicable laws ("US Person"). I/We hereby represent and confirm that I/any of us am/is not a US Person nor act for any US Person. I/We undertake that, I/we inform you immediately if I/any of us become or am/is regarded as a US Person. If my/our above representations and warranties are untrue or cease to be true, or I/we fail to comply with the above undertaking, or I/any of us become or is regarded as a US Person, the Bank is entitled to, at any time at its sole discretion, unilaterally terminate any SIP I/we hold at that time without a need to give me/us a prior notice nor obtain my/our consent. I/We agree to assume any consequences occurred in relation to such early termination (including but not limited to any tax imposed, and/or principal and return loss) and agree that the Bank shall not take any liabilities in this regard. |
| <b>(j)</b> | I/We understand and agree that, the Bank will disclose information about the SIP and transactions by sending the statements (including monthly statements and e-advice) to my/our Electronic Banking channel through electronic method, so as to facilitate me/us to understand the relevant information of the SIP. I/We shall inquire relevant disclosed information of the SIP through Electronic Banking channel regularly by myself/ourselves, and may also visit the Bank or contact my/our relationship manager to understand the relevant information of the SIP. For more information regarding channels of information disclosure, please refer to the "Customer Right Instruction".                                                                                                                                                                                                                                                                                                                                                                                       |

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).

Customer Signature \_\_\_\_\_

Date \_\_\_\_\_



| For Bank Use Only                                                                                                                                                                                    |                                                                                 |                                            |                                                                                                                                        |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------|
| <b>Customer qualification check</b>                                                                                                                                                                  |                                                                                 |                                            |                                                                                                                                        |          |
| T&C Sign-off Record (please tick):<br><input type="checkbox"/> 1 <sup>st</sup> sign off record <input type="checkbox"/> System record                                                                | <input type="checkbox"/> Sole Account<br><input type="checkbox"/> Joint Account | <input type="checkbox"/> CIF :             | <input type="checkbox"/> Supervisor Call This Time (Fill below Grey part if yes)<br><input type="checkbox"/> Effective Supervisor Call |          |
| Time of Supervisor Call:                                                                                                                                                                             | Extension:                                                                      | Name of Supervisor:                        | Initial:                                                                                                                               |          |
| <input type="checkbox"/> Return mail customer<br><input type="checkbox"/> Enough Balance                                                                                                             | <input type="checkbox"/> Dormant Account                                        | <input type="checkbox"/> Resident Customer | <input type="checkbox"/> FATCA                                                                                                         |          |
| <input type="checkbox"/> Order placed in subbranch phone                                                                                                                                             | <input type="checkbox"/> Order placed by                                        | <b>Customer Risk Rating :</b>              |                                                                                                                                        |          |
| <b>For orders placed by phone</b>                                                                                                                                                                    |                                                                                 |                                            |                                                                                                                                        |          |
| Time of call initiated by customer (for phone order) (YYYY-MM-DD HH:MM):                                                                                                                             |                                                                                 | Customer call number:                      | Ext No.:                                                                                                                               |          |
| Call back conducted: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Reason for call back: <input type="checkbox"/> Required by initial call<br><input type="checkbox"/> Supplement call |                                                                                 | Name of call back Staff:<br>Call to No.:   | Ext No.:<br>Initial:                                                                                                                   |          |
| Nicelog checked by (staff name):<br>Date:                                                                                                                                                            |                                                                                 | Initial:                                   |                                                                                                                                        |          |
| <b>For all orders</b>                                                                                                                                                                                |                                                                                 |                                            |                                                                                                                                        |          |
| Time of Staff Handling:                                                                                                                                                                              | RM 1bank ID:                                                                    | Place:                                     | Name of Handling Staff:                                                                                                                | Initial: |
| CIF No.                                                                                                                                                                                              | <input type="checkbox"/> New Fund<br><input type="checkbox"/> Existing Fund     | Handling Sub-branch Code:                  | Whole Documents Checked By:<br>Date:                                                                                                   |          |
| <b>For 大额交易</b>                                                                                                                                                                                      |                                                                                 |                                            |                                                                                                                                        |          |
| DOA 签字                                                                                                                                                                                               |                                                                                 | 日终交易审核主管签字                                 |                                                                                                                                        |          |