

FULL SET OF DCR 2021 QUESTIONS (ALL SECTORS)

Part A: Information on Reporting Institutions (Page 1/3)

1. Sector *

Pawnbrokers

2. Type of Business *

Company

4. Name of Firm *

PAJAK GADAI DEMO A

5. Firm Identification

BRIC Number *

BRIC Issuer *

SuruhanJaya Syarikat Malaysia

License Number *

License Issuer *

KPKT

6. E-mail of Firm *

pajakgadaidemoa@gmail.com

7. Address of Firm *

No 123 Jalan Bukit Bintang Taman ABC Kuala Lumpur Malaysia No 123 Jalan Bukit Bintang
Taman ABC Kuala Lumpur Malaysia

8. City *

9. Postcode *

43200

10. State *

Selangor

11. Telephone Number *

0145978624

12. Please provide details of your Compliance Officer

Name of CO *

TESTING

CO number *

123456789

Email of CO *

TESTING@GMAIL.COM

Contact Number of CO *

123456789

Part A: Information on Reporting Institutions (Page 2/3)

Sector *

13. Number of all employees *

3



For Lawyers, Company Secretaries, Accountants and Registered Estate Agents only

14. Number of practising RI in your firm

14A. Number of practising RI in your firm that provides GA services



For Registered Estate Agents only

15. Number of real estate negotiators attached to your firm for the year 2020

16. Does your firm employ any compliance system to aid the firm's compliance to the AML/CFT requirements? *

Note: Please note that employment of a compliance system is not a compulsory requirement. Reporting institution may employ any system, manual or otherwise, for effectiveness of its compliance programme.

17. How much is the firm's total investment/expenses on AML/CFT compliance (including system, training, documentations, etc.), if any?

2019 (RM) *

2020 (RM) *

18. Are you/your firm a member of any industry association?

Member Firm of Industry Association *

Yes

Name of association

Pawnbroker association

Part A: Information on Reporting Institutions (Page 3/3)

19. Have any investigation orders under AMLA (including sections 32, 37, 44, 45, 48, 49, 50, 51 and 52 of the AMLA) been issued to your firm?

19A. How many of such orders that your firm have responded to in 2020?

Section 32	Power to examine persons
Section 37	Delivery of property, record, report or document
Section 44	Freezing of property of a person who is under investigation for an offence of money laundering or terrorism financing
Section 45	Seizure of movable property
Section 48	Investigation powers in relation to a financial institution
Section 49	Public Prosecutor's powers to obtain information
Section 50	Seizure of movable property in financial institution
Section 51	Seizure of immovable property
Section 52	Special provisions relating to seizure of a business

If 'Yes' need to state which section in 19A

Part B: Business Information and Structure (1/19)

Note: Information in this part is filled based on business/operations conducted in 2020.

Please select your sector.

Pawnbroker

Question 1 - 4 should be based on the entire business/operations of your firm (all activities/services)

1. What is the total revenue of your firm? (Value in RM)

2019 *

2020 *

895562.26

2. What is total number of transactions of your firm for the year 2020?

405

3. What is the total value of all cash transactions (inward and outward payments) by your firm in year 2020? (Value in RM)

testing

4. What is your firm's total number of customers?

As at 31 December 2019 *

testing

As at 31 December 2020 *

25

Question 5 onwards should be based on activities regulated under AMLA and Policy Documents.

5(i). Please provide the total number of individual customers of your firm in year 2020.

25

5(ii). From the total individual customers, please fill the number for respective type of individual customers, where applicable.

Domestic politically exposed person (PEP) *

Foreign politically exposed person (PEP) *

Customers who are sanctioned individuals for terrorism financing (TF)

Customers who are sanctioned individuals for proliferation financing (PF)

Customers who are sanctioned individuals based on other sanctions list (e.g. OFAC)

Customers who are listed under the Financial Consumer Alert (FCA) list *

High Net Worth individual clients as defined by your firm *

5(iii). Please provide the total number of legal person customers of your firm in year 2020.

5(iv). From the total of legal person customers, please fill in the number for the respective type of legal person customers, where applicable.

Companies *

Partnerships *

Limited liability partnerships *

Sole proprietors *

Government-Linked Companies (GLCs) *

Non-Profit Organisations (NPOs) / Societies *

Customers (legal persons) who are sanctioned entities for terrorism financing (TF) *

Customers (legal persons) who are sanctioned entities for proliferation financing (PF) *

Customers (legal persons) listed under the Financial Consumer Alert (FCA) list *

Customers (legal persons) who are sanctioned entities based on other sanctions list (e.g. OFAC) *

Beneficial owners of legal persons who are foreigners *

Beneficial owners of legal persons who are domestic PEPs *

Beneficial owners of legal persons who are foreign PEPs *

Beneficial owners of legal persons who are high-net-worth individuals *

5(v). Please provide the total number of legal arrangement customers of your firm in year 2020.

5(vi). From the total of legal arrangement customers, please fill in the number for the respective type of legal arrangement customers, where applicable.

Trust *

Other types of legal arrangements

Please specify other types of legal arrangements

6. Does your firm have foreign individual / legal person / legal arrangement customers?

No Yes

6A. Please state the countries and the number of customers from each country.

Country

No. of customers

Country

No. of customers

Country

No. of customers

Country

No. of customers

Country

No. of customers

Country

No. of customers

Country

No. of customers

Country

No. of customers

Country

No. of customers

7. How do customers make payment to your firm? (Please fill in the total value of transactions for each payment method, if any) (Estimated value in RM)

Cash (including cash payment deposited into cash deposit machine (CDM)/ at counter into RI's account) *

Cheque *

Telegraphic Transfer (TT)/ Bank Transfer *

Debit Card/ Credit Card *

E-Wallet/ e-money *

TESTING

Other types of payment methods

Please specify other types of payment methods

8. How does your firm establish business relationships with its customers?

Non-face-to-face (does not meet the clients at all throughout business relationship) *

Face-to-face *

10. Does your firm have any local branch(es)?

No Yes



10A. Please state the location of the branch(es) by postcode.

1

2

3

4

5

6

7

8

11. Does your firm have any foreign branch(es)?

No Yes



11A. Please state the location of the branch(es) by country.

1

2

3

4

5

6

7

8

SPECIFIC TO PAWNBROKERS

Part B: Business Information and Structure (17/19)

Pawnbrokers

26. Does your firm provides ar-rahnu service?

☒ No ☐ Yes

27(i). Please provide the number of customers for pawn and redemption.

Pawn

24

Redemption

8

Ar-rahnu pawn

Ar-rahnu redemption

27(ii). Please provide the number of pawn/redemption.

Pawn

308

Redemption

48

Ar-rahnu pawn

Ar-rahnu redemption

27(iii). Please provide the value of pawn/redemption. (Value in RM)

Pawn

714129.56

Redemption

146671.05

Ar-rahnu pawn

Ar-rahnu redemption

Part B: Business Information and Structure (19/19)

Pawnbrokers

Is there any other information/comments relating to business information and structure within your firm that you wish to provide?

Please continue to next page.

Part C: AML/CFT Risk Assessment (Page 1/1)

Note: Information in this part is to be filled based on current implementation/practice within your firm.

1. On a scale of 1-5, to what extent does your firm understand its own money laundering (ML) and terrorism financing (TF) risks? *

2. Has your firm conducted any ML/TF risk assessments on its own business? *

2A. If yes, was it documented?

3. Does your firm have processes / policy to ensure that the firm's ML/TF risk assessments are up-to-date?

3A. If yes, how often do you conduct/review the ML/TF risk assessment for your firm's business? (If the firm conducts periodic review by time period and circumstances, please choose Others and fill in the number of time period and other circumstances change)

If others, please specify

4(i). Please select the corresponding ML risk rating level for the following factors.

Customer risk

Product risk

Transaction/delivery channel risk

Geographical risk

4(ii). Please select the corresponding TF risk rating level for the following factors.

Customer risk

Product risk

Transaction/delivery channel risk

Geographical risk

4A. What are the main ML/TF risk drivers or risk issues that you have identified for your firm or business?

5. How many customers does your firm classify as having high ML risk?

6. How many customers does your firm classify as having high TF risk?

6A. Please specify what constitutes as customers with high TF risk.

7. What products/services does your firm classify as high risk for ML? Please specify, if any.

8. What products/services does your firm classify as high risk for TF? Please specify, if any.

Note: Information in this part is filled based on current implementation/practice.

CUSTOMER DUE DILLIGENCE

1. Does your firm have any individual customers?

YES

1A. What information do you collect when you identify your individual customer, or person conducting transaction or beneficial owner?

(Note: For gaming outlet, when identifying your winner, or person conducting transaction on behalf of the winner or any other person specified by the winner.)

Full name

YES

Contact number (home, office or mobile)

YES

Residential and mailing address

YES

Date of birth

YES

Nationality

YES

Occupation type

YES

NRIC number, passport number or reference number of any other official documents

YES

Name of employer or nature of self-employment or nature of business

YES

Purpose of transaction or intended nature of business relationship

YES

Other, please specify

1B. What documents do you use to verify the identity of your individual customers?

Government issued photographic documents : NRIC / Passport / Driving License

YES

Government issued non-photographic documents: e.g. MyKid, birth certificate, pension card

YES

Electronic or digital data and information to verify identity, e.g. digital identity or e-KYC solutions

NO

Other reliable documents, please specify

Part D: AML/CFT Programme (Page 02/16)

2. Does your firm have any customers who are legal persons (e.g. company, partnership, limited liability partnership, sole proprietor)?

NO

Part D: AML/CFT Programme (Page 03/16)

3. Does your firm have any customers who are legal arrangements (e.g. trusts)?

NO

Part D: AML/CFT Programme (Page 04/16)

4. Does your firm identify and take reasonable measures to verify the identity of the beneficial owners of legal person customers, through the following steps?

Note: Beneficial owner refers to any natural person(s) who ultimately owns or controls a customer and/or the natural person on whose behalf a transaction is being conducted. It also includes those natural persons in the following sequence:

STEP 1: Identify the directors/ shareholders with equity interest of more than 25%

NO

If less than 25%, please specify the percentage (%):

STEP 2: If there is doubt on the controlling ownership interest under STEP 1, identify the natural person exercising control over the legal persons through other means.

NO

STEP 3: If there is no natural person identified under STEP 1 and STEP 2, identify the natural person who holds the senior management position

NO

Please continue to next page

Part D: AML/CFT Programme (Page 05/16)

5. Has your firm conducted delayed verification?

NO

6. Does your firm use biometric identification methods (i.e. scan fingerprints by using biometric device) to verify the NRIC of the customers? (Note: This is an optional method of verification)

NO

7. Does your firm rely on third party reporting institution in conducting Customer Due Diligence (CDD)?



Example: Bank, insurance company, company secretary, foreign bank, etc.

Please specify

Part D: AML/CFT Programme (Page 06/16)

RECORD KEEPING

8. Does your firm keep copies or records of the identification documents of the customer as requested in Questions 1B, 2B, 2C, 3B, 3C and 4?

9. Does your firm keep copies of all transaction records of customers?

9A. How long would the copies of customers' records transactions be kept?

9B. How does your firm keep copies of the relevant records?

Hard copies

Digital copies

Others (please specify)

9C. Do you think the transaction records are kept in a way that would allow reconstruction of individual transactions so as to provide, if necessary, evidence for prosecution of criminal activity?

Part D: AML/CFT Programme (Page 07/16)

TARGETED FINANCIAL SANCTIONS (TFS)

10. What are the sanctions lists maintained by your firm?

Ministry of Home Affairs (MOHA) Sanctions List *

UNSC Resolution 1267 Sanctions List for Terrorism *

UNSC Resolution 1988 Sanctions List for Terrorism *

UNSC Resolution 1718 Sanctions List on Proliferation of Weapons of Mass Destruction *

UNSC Resolution 2231 Sanctions List on Proliferation of Weapons of Mass Destruction *

Other UNSC Resolution Consolidated Sanctions List *

Other sanctions list (please specify)

10A. Does your firm screen ALL its customers' against the sanctions list as selected in Question 10, when conducting Customer Due Diligence (CDD)?

10B. Does your firm have any work processes to deal with any matches from the Targeted Financial Sanctions (TFS) lists?

Part D: AML/CFT Programme (Page 08/16)

CUSTOMER RISK PROFILING

11. Does your firm risk profile or classify its customers for ML/TF risk to enable conduct of enhanced due dilligence and monitoring?

11A. Does your firm able to identify higher risk customer?

11B. What ML/TF risk factors does your firm establish to classify higher or lower risk customers?

Customer risk (e.g. exposure by type of customer)

Product and services risk (e.g. nature and level of complexity of products / services)

Transaction/delivery channel risk (e.g. frequency of cash payments or cross border transaction, face-to-face/agents)

Geographical risk (e.g. location of branches, subsidiaries and/or agents)

Other, please specify

11C. What are the steps taken by your firm prior to establishing business relationship or conduct transaction for higher risk customer?

Obtain additional information on the customer (e.g. volume of assets and other information from public sources/ database)

Seek approval from senior management

Enquire on source of wealth and/or funds

Other, please specify

Part D: AML/CFT Programme (Page 09/16)

ON-GOING DUE DILLIGENCE

12. Is your firm able to identify repeat customers?

12A. Does your firm have any repeat customers?

12B. When dealing with repeat customers, which of the following are employed?

Review where necessary, record changes to documents, data or information previously collected from the customers to ensure it is up-to-date and relevant

Monitor and review customers' transactions throughout the business relationship to ensure the transactions are consistent with the customers' known risk profile

Ensure frequency in conducting on-going due diligence and enhanced on-going due diligence commensurate with the level of ML/TF risks posed by the customer based on the risk profiles and nature of transactions.

Others (please specify)

SUSPICIOUS TRANSACTION REPORTING

13. Has your firm identified relevant triggers, conditions or scenario (also called red flags) to help indicate that a transaction is suspicious?

13A. If Yes, are the established red flags written or documented?

Part D: AML/CFT Programme (Page 10/16)

14. Has your firm established procedures/workflow for the submission of Suspicious Transaction Report (STR) to BNM?

14A. If yes, does your firm ensure the Suspicious Transaction Report (STR) reporting mechanism is operated in a secured environment that maintains confidentiality and preserves secrecy of information?

14B. How did your staff report unusual/potentially suspicious activity to the Compliance Officer (CO)?

Email

Online form

Paper form

Verbally

Others, please specify

14C. In the event that suspicion is established, how long does the Compliance Officer (CO) takes to submit the Suspicious Transaction Report (STR) to BNM?

Please specify

Part D: AML/CFT Programme (Page 11/16)

15. Has your firm reported any Suspicious Transaction Report (STR) to BNM? *

15A. If No, what are the reasons of not reporting Suspicious Transaction Report (STR)?

No suspicious activities identified

Unable to determine what is suspicious

Do not know how to report

Do not have a compliance officer

Worry about secrecy or safety

Others (please specify)

Part D: AML/CFT Programme (Page 12/16)

MANAGEMENT INFORMATION SYSTEM

16. Does your firm have a management information system (MIS), either electronic or manual?

16A. Is your firm's management information system (MIS) able to:

Provide customers' records and transactions in a timely manner

Aggregate customers' transactions from multiple files and/or from different systems across all branches, where relevant

Able to pick up anomalies in transactions

AML/CFT POLICIES AND PROCEDURES

17. Does your firm have a written AML/CFT policy, procedures and controls? (For small firm, at minimum, adopt the AML/CFT and TFS for DNFBPs and NBFIs policy document as your policies and procedures?)

17A. If yes, does your firm ensure that the written AML/CFT policies, procedures and controls are kept up-to-date with BNM's regulatory requirements?

17B. Are your firm's AML/CFT procedures and controls approved by the senior management/board of directors/senior partners, where relevant?

17C. How often does your firm review the policies and procedures?

Part D: AML/CFT Programme (Page 13/16)

EMPLOYEE TRAINING AND AWARENESS

18. Does your firm conduct training and awareness programmes for the employees on the firm's AML/CFT practices and measures?

18A. What type of training does the firm provide to its employees?

Internal AML/CFT training

Regular refresher or update

Newsletter or circular

External training - BNM

External training - E.g. Bar Council, MIA, MAICSA, MACS, MIEA, PEPS

Online or e-module available via electronic means

18B. Does your firm ensure that the training provided is appropriate to the employee's level of responsibilities in detecting ML/TF activities and the risks of ML/TF identified by your firm?

EMPLOYEE SCREENING PROCEDURE

19. Does your firm conduct employee screening?

19A. When is the screening conducted?

19B. How is your employee screening conducted?

Please specify

19C. Does your employee screening procedure includes the following assessment?

Personal information

Employment history

Financial history

Part D: AML/CFT Programme (Page 14/16)

COMPLIANCE OFFICER

20. Does your firm's Compliance Officer have the necessary knowledge and skills to discharge his/her AML/CFT obligations?

20A. Has the Compliance Officer attended any AML/CFT training?

20B. Does the Compliance Officer have any AML/CFT certification? [Note: This is a best practice and not a requirement under the Policy Document]

Part D: AML/CFT Programme (Page 15/16)

AML/CFT INDEPENDENT AUDIT

21. Does your firm conduct regular AML/CFT independent audits (frequency to be determined by the Board/Senior Management/senior partners) to determine compliance and effectiveness of AML/CFT measures employed by your firm?

Part D: AML/CFT Programme (Page 16/16)

OTHERS

22. What areas of the AML/CFT requirements does your firm find the most challenging to implement?

Customer Due Diligence (CDD) *	
Enhanced Due Diligence (EDD) *	
Customer risk profiling *	
Record keeping *	
Sanctions screening *	
Board/SM/senior partner approval for AML/CFT measures *	
Reporting of STR *	
Identification of red flags for STR reporting *	

Institutional/business risk assessment *

Employee training *

Employee screening *

23. Is there any other information/comments relating to the AML/CFT requirements/implementation within your firm that you wish to provide? (including implementation challenges during the period of MCO or Covid-19 pandemic generally)

Name of person filling in the DCR *

Designation *

E-mail *

I/My firm hereby confirm(s) that all information provided in this DCR is complete and accurate to the best of my knowledge. I understand that submission of this DCR is final and no amendment is possible after the DCR is submitted. *