



Account-Opening For Non-individual Customers

Thank you for choosing us for your business needs.

We are pleased to attach herewith an account-opening pack to assist you in opening an account with us. It includes a document checklist, a non-individual account application form and other forms. The documents in the checklist must be provided to the Bank to facilitate the opening of the account.

You can obtain and read the terms and conditions governing our non-individual accounts at uob.com.sg or by clicking on the following hyper links:

- Terms and Conditions Governing Accounts and Services
- Additional Terms and Conditions Governing Accounts and Services

If you have any enquiry, please contact your Relationship manager or visit any of our branches or call 1800 226 6121 to speak with our customer service officers.

We look forward to being of service to you.



FOR BANK USE	
Application No:	

APPLICATION FOR NON-INDIVIDUAL ACCOUNT(S)

To: UNITED OVERSEAS BANK LIMITED / FAR E	EASTERN BANK LI	IMITED		
(each a "Bank")				
APPLICANT PARTICULARS				
Applicant Name: 47 - A&A Pte Lt	d		Registered ID:	
* Not required to be filled if you have an existing account under the	he same applicant name			
* Registered Address: C/O STATFOR LAW	Coeparano	2	Contact Information:	
			Office No: +65	3127356
Mailing Address: LO COLLYER QUAY	- # 29 - 00	3	Fax No:	
SINGAPORT OLDS	COUTTE		Email:	gliette @ hockington. co
		* Nature of Business:	SAIES OL	IT PLONUCTS
* Date of Incorporation: * Country of Incorporation: SIN CAPORE				IT PLOSUCTS
* Country of Business Operation: SINGAPORE	APAC	Primary Clientele Ba Annual Turnover:	ase:	
SIGNING INSTRUCTIONS				
(Please tick either box)				
Signing Condition as per my / our existing a/c to be in	the same currency as a	accounts applied for	. Please specify a/c n	0:
🔏 Per Operating Mandate - attached				
ACCOUNT(S) APPLIED FOR				FOR BANK USE
Product: BUSINESS INTERNET BONKIN	Goov Sex			A/C No:
Account Name: LT -AMA	(CC1			Cheque Range:
Additional Account Information				
Purpose of Account: Transactional	☐ Investment	☐ Loan Repa	ayment	
Others (pls specify)				
Source of Funds: [Origin of incoming funds (Do not state of Business Proceeds	ther banks as the source ☐ Services Rendered	_	1.5	
☐ Commission or Contract Fee			investinents	
Country of Funds Origin: Singapore	Others (pls specify	. 0		
Product:	(CCY:)			A/C No:
Account Name:				Cheque Range:
Additional Account Information				
Purpose of Account:	☐ Investment	Loan Rep	ayment	
Source of Funds: [Origin of incoming funds (Do not state of	her banks as the source	e). You may tick more	e than one boxl	_
☐ Business Proceeds	☐ Services Rendered		8 SC 5011 SC 505 505 505 1	
☐ Commission or Contract Fee				
Country of Funds Origin: Singapore	Others (pls specify	n		
	00.20 0			A/C No:
Product:	(CCY:)			Cheque Pange:
Account Name: Additional Account Information				
Purpose of Account: Transactional	☐ Investment	Loan Repa	ayment	
Others (pls specify)				
Source of Funds: [Origin of incoming funds (Do not state of	her banks as the source	e). You may tick mor	e than one box]	
☐ Business Proceeds	Services Rendered	Addition 1	Investments	
☐ Commission or Contract Fee Country of Funds Origin: ☐ Singapore	☐ Others (pls specify) ☐ Others (pls specify)			
January Constant of State of S	_ Calcid pid apecily			
CONFIRMATION & AGREEMENT (To be signed	by person(s) author	orised to open t	he Account(s))	要是1000年来到3000年的中央1000年
We, the aforesaid Applicant named in this Application, th	rough our convoved a	percon(e) percod be	lows	
hereby request United Overseas Bank Limited / Far Ea		AND THE PARTY OF T		us in the Application;
acknowledge that the submission of this Application are				
right to reject any Application without assigning any re-	ason whatsoever;			neaw
				fe.kp.aw

OPERATING MANDATE

Account Name: FT - A SIA

Part	1

Account Number: ____

OPERATING MANDATE						
Product: BUSINESS INTE	ENE BANKING (CCY:	563)	Signing Requirement			
Authorisation Limit (Please check and complete the application boxes)						
□ Any Amount						
☑ Up to						
□ Aboveto_						
□ Aboveto_				-		
☐ Aboveto						
☐ Other Signing Requirement						
PARTICULARS OF SIGNATORY(IES)		Please sign	within the boxes below			
Name: SAVIEL BULLETTA NRIC / Passport No.: YATI 7570	Residential Address: 20 EVEC 3N 6	606 6 06				
Country of Birth: しとても ドルんか	T DOB: 11/03/1983					
Nationality: TOU AND	Home No:					
Gender: TA G	Office No:					
Position: MCCOR	Mobile No: +65912+3565	Signature	Group:			
Additional ID Number Identity Number:	ID Type:	ID Country of Issue:	ID Expiry Date:			
identity Number.	ID Type:	D Country of Issue:	ib Expiry Date:			
Name: DAVID VINCENATION	Residential Address: VIA 6.7EVET					
NRIC / Passport No.: 044663919	10 - 17	EVA				
Country of Birth: ITAL 4	DOB: 06/12/1967					
Nationality: Tous	Home No:					
Gender: MACE	Office No: \$39 02.2906066	23				
Position: 30A2D HEYGER	Mobile No:	Signature	Group:			
Additional ID Number Identity Number:	ID Туре:	ID Country of Issue:	ID Expiry Date:			
Name: GIANCARO RUSSO	Residential Address: VIA ၾ ƙu IM	0				
NRIC / Passport No.: YAZ335338	MIDS 200 STORES	7				
Country of Birth: (つく)	DOB: 07/05/1981					
Nationality: ITAU AW	Home No:					
Gender: TSUC	Office No: +39.02.2906060	3				
Position: 30ARS TERROER	Mobile No:	Signature	Group:			
Additional ID Number Identity Number:	ID Type:	ID Country of Issue:	ID Expiry Date:			
Name:	Residential Address:					
NRIC / Passport No.:	72					
Country of Birth:	DOB:					
Nationality:	Home No:					
Gender:	Office No:					
Position:	Mobile No:	Signature	Group:			
Additional ID Number Identity Number:	ID Type:	ID Country of Issue:	ID Expiry Date:			
NRIC / Passport No: 44717530	L JULIAN GIONANNI MAGUE	NRIC / Passport No:	e / Name:			
Date:		Date:				

- (d) to appoint, add, remove and/or replace any person or persons (including themselves) as signatories of the Accounts ("Approved Signatories") and to set and determine the mandate or authority of the Approved Signatories and to confirm their appointment and certify their specimen signatures and such other particulars as the Bank may require;
- (e) to appoint, add, remove and/or replace any person or persons (including themselves and the Approved Signatories) as signatories or users of the Services ("Approved Users") and to set and determine the mandate or authority of the Approved Users and to confirm their appointment and certify their specimen signatures and such other particulars as the Bank may require;
- (f) to provide such security as may be required by the Bank in connection with the Accounts and/or Services, and to sign the security documents required by the Bank;
- (g) to give the Bank written instructions, consents or indemnities in connection with the Accounts and the Services;
- (h) to sign any other document as may be required or appropriate or which is incidental to the matters authorised by these Resolutions generally.
- 5. Approved Signatories: That the Approved Signatories be and are hereby authorised to perform the following acts and things for and on behalf of the Applicant, according to the signatory requirements and limits (if any) set by the Approved Persons:-
 - (a) to operate the Accounts and to close any Account of which they are the Approved Signatories;
 - (b) to apply for, obtain, use and avail of any temporary overdraft or ad hoc trade or other facility or banking accommodation (including without limitation bankers' guarantees, letters of credit, bills of exchange purchased, bills discounting, trust receipts) and in connection therewith:-
 - (i) to pledge, charge, assign, endorse and deliver such goods, moneys, bills of lading, warehouse receipts, rights, title and interests as the Bank may require as security for the facility or banking accommodation;
 - (ii) to sign letters of pledge, charge, indemnity, guarantee, deposit, trust receipt or hypothecation and any other document as the Bank may require;
 - (iii) to give valid receipts and full discharges to the Bank for moneys, documents, securities or other property released by the Bank to the Applicant;
 - (c) to enter into foreign exchange trades and transactions with the Bank and to sign all documents in connection therewith;
 - (d) to authorise and request the Bank to purchase or sell for account of the Applicant, currencies, stocks, bonds and other securities and gold or other precious metals and to sign all documents in connection therewith; and
 - (e) to deal and agree with the Bank on any of the matters set out in this Resolution 5 generally.
- 6. <u>Approved Users</u>: That the Approved Users shall use the Services according to the authority specified by the Approved Persons for each of them and each Approved User may terminate his own use of the Services at any time. The Approved Users shall include the persons (by whatever name called in the documents for the Services) who have been appointed to use the Services by the Approved Persons.
- 7. That the Bank be and is hereby authorised to act on any instruction from the Approved Persons, Approved Signatories or Approved Users and honour any instrument, document, or instruction given by them within the limits and scope of their authority.

Change of Approved Persons, Approved Signatories and Approved Users

- 8. <u>Change of Approved Persons</u>: That any amendment to the list of Approved Persons, their authority and/or their signing conditions shall only be made by amending resolutions duly passed by the Applicant, and communicated to the Bank who shall be given a reasonable period of time to effect the amendment.
- 29. Change of Approved Signatories and Approved Users: That any amendment to the list of Approved Signatories and Approved Users and their authority shall only be made by written notice given by the Approved Persons signing according to the signing conditions set out in the Schedule hereto and communicated to the Bank who shall be given a reasonable period of time to effect the amendment.

Schedule of Approved Persons

gning (Singl	Conditions of Approved Person(s)	☐ Any two jointl	v
	rs (please specify, e.g. : "One A and One B OR One A		
No	Particulars of Approved Person(s)*	Group (A, B or C)	Please sign within the boxes below
1.	Name: SANIEL DUAN GIOVANNI TAG UETTA NRIC/Passport No.: 447117570		
	Designation/Title: Son (ECTO)		
2.	Name: DAVIS VINCENSET		
	NRIC/Passport No.: AA GO 69979 Designation/Title: DARS WENGER		
3.	Name: GIANCARLO RUSS		
	NRIC/Passport No.: 42375378 Designation/Title: 32405 ************************************		
4.	Name:		
	NRIC/Passport No.: Designation/Title:		
5.	Name:		
	NRIC/Passport No.: Designation/Title:		
ertified	thisday ofby the follow	wing persons for and o	n behalf of the Applicant:
		N 6 6	
	DONTEL TOUR GOVERNI TUGUETA		266 See 246
	tion: Director	Designation:	NS TERMISER
ame: [DAVID VINCOUVER	Name:	
	assport No.: AA (069939	NRIC/Passport No.:	
	tion: BARD TENGER	Designation:	

+ Where

• Where an Applicant is a Limited Partnership, limited partners may **not** be appointed as Approved Person(s).

	Please provide your Non-US T You are not able to come within the definition of a Financial Institution, Active NFFE or Exempt Beneficial Owner (Please proceed to Section 3)							
	Others You do not fall under any of the above statuses. Please provide an U.S. IRS Form W-8BEN-E / W-8IMY / W-8ECI / W-8EXP.							
SECTIO	N 3: U.S. CONTROLLING PERSON	S OF PASSIVE NFFE						
Please	tick one of the following statement	s if your FATCA Clas	sification is Passive	NFFE				
☐ Non	e of the Controlling Persons (whose p	percentage of ownersh	nip is 25% or greater)	of the company is/are U.S. Person(s)				
One deta	or more of the Controlling Persons (will be with the controlling Persons (will be with the controlling Persons (with the contr	hose percentage of o	wnership is 25% or gr	eater) of the Company <u>is/are</u> U.S. Person(s				
Nar	me	Address		J.S. TIN				
		200 2000 2000	1000 M					
We unde	ertake to immediately notify the Bank	in writing if any other	person(s) become(s) a	a US Controlling Person(s).				
	undertake to provide such documents sole discretion for the purpose of the			operating of this account and from time to Person(s) is/are not a US Person(s).				
STREET, SQUARE, SQUARE,	N 4: ACCEPTANCE AND UNDERTA							
notify U		g of any change in cir	cumstances that caus	lete, current and accurate. We undertake to ses any certification on this form to become				
harmles legal cos	s the Bank against any and all liabiliti	ies, actions, claims, lo or incurred by the Banl	sses, damages, costs	shall indemnify, keep indemnified and hold s and expenses (including but not limited to onnection with any of the Beneficial Owners				
Signatur	'e**		Signature**					
Name]	DANIEL JULIAN GIOUR	WWW TOBUETT	Name					
NRIC/ P	assport* 4 7117570		NRIC/ Passport*					
Date			Date					
** To be	signed by any 2 directors OR 1 direc	tor & 1 company secre	etary					
GLOSS	ARY							
	ling Person, in Singapore, is conside s an interest of more than 25% of the							
b) Can	exercise more than 25% of the voting	g power at the shareho	olders meeting of the	entity;				
CI Hac	Can exercise more than 25% of the voting power at the shareholders meeting of the entity; Has direct or indirect control or power of decision in the entity;							
d) Is a l	direct or indirect control or power of the cap particular control over 25% or more of	oital of the entity; or						

GLOSSARY

- b) Non-U.S. individuals who are United States taxpayers can request an 'Individual Tax Identification Number' (ITIN) via IRS form W-7 or www.irs.gov.
- c) For organizations and employers the U.S. TIN is the Employer Identification Number (EIN). This number may be requested via IRS form SS-4 or www.irs.gov.

More information is available about identification numbers and the process to request these numbers on www.irs.gov.

For Bank Use Only	
FOR BRANCHES/BUSINESS UNIT USE ONLY	
FATCA cure documents enclosed:-	
☐ Please state:	-
FATCA Identification Status : Complete Pending	
Attended/Processed By* Name: Lan ID: Staff ID	Signature Verified by (For Thumbprint-Witnessed by): Name: Lan ID: Staff ID
Signature/Date	Signature/Date
FOR CMOC USE ONLY	
Processed By	Approved By
Signature and Name Date	Signature and Name Date



DECLARATION OF BENEFICIAL OWNERSHIP

SECTI	ON A: BASIC IN	IFORMATION		LAP W			
X F	For Company						
Regist	tered Business I	Name LT A	81A P	te Ct.	A		_
						try of Business 812646013	1 / AF
Nature	e of Business	SALES OF	IT MOS	عدم تعد	· St RC	ices	-
Conta	ct Number <u>+6</u>	59/273560	(Office)		(Fax)	nage ette le hocking tou	(Email)
	For Personal A	ccount					
Accou	ınt Number						
	int Name						
Accoun							
	31						
Conta	ct Number		(Office)		(Fax)		(Email)
SECTI	ION B: BENEFIC	CIAL OWNER'S DECL	ARATION				
						by the ultimate beneficial owner(s	
	mentioned com vnership in futui		follows. I/We	undertake to	keep the B	ank informed should there be any	cnange t
	Name	NRIC / Passport # (include Add IDs)	Date Of Birth / Age	Nationality	Country of Birth	Residential Address	% shares
47	SPL	πο392(1)Σ©	63	MALY		VIA 765COVA 13.761A	ا ا
		+					
		+					
		+					<u> </u>
		-					1
Reality A. Better Walter	ION C: ACKNOV		he entitled to	roly on my/s	ur doolarati	ion(s) above on the beneficial own	orehin
	III CONTRACTOR OF CONTRACTOR O	signed by administrat		- Committee of the Comm			cromp.
For Co	orporate: To be	signed by any 2 direc	tors OR 1 dir	ector & 1 sec	retary		
	ure & Date				Signature &	Date	
ivame:	Danier 3	sucion Ribion	WI TEAG	U EITA	Name:		
	ture & Date				Signature &	Date	
Name:					Name:		