

## BUSINESS BANKING FACILITIES APPLICATION FORM

CREDIT FACILITIES REQUESTED					
Facility Type	Amount(\$\$)	Tenure	BUNDLED Facility Type	Amount(\$\$)	Tenure
<b>BizTrade+</b> Under <input type="checkbox"/> Trade <input type="checkbox"/> LIS Trade <input type="checkbox"/> Letter of Credit <input type="checkbox"/> Trust Receipt (DA/DP) <input type="checkbox"/> TR (Invoice Financing) <input type="checkbox"/> Shipping Guarantee <input type="checkbox"/> General Indemnity <input type="checkbox"/> Bill Exchange Purchase (mark "X" where applicable)			Mortgage Loan against Property		
			Unsecured Term Loan		
			Overdraft		N.A.
			Foreign Exchange Line		
			Banker's Guarantee		
			Commercial Credit Cards		N.A.
			Others (please specify):		

Please approach your Relationship Manager for separate Business Credit Card / Hire Purchase / Equipment Loans forms.

COLLATERAL INFORMATION			
* Where applicable			
Collateral Type	Currency	Amount	Remarks
Fixed Deposit	<input type="checkbox"/> SGD <input type="checkbox"/> USD <input type="checkbox"/> Other currency: (Please specify):		
Property (Please complete below section) <b>ONLY COMPLETED PROPERTY ARE ACCEPTABLE AS COLLATERAL FOR BIZTRADE+</b>			
<b>Property Address</b> (where property is pledged as collateral)  Postal Code		<b>#Purpose</b> <input type="checkbox"/> Pledged as Collateral (Fully Paid) <input type="checkbox"/> Re-finance from other Bank or Financial Institution Outstanding Amount (\$\$) _____ CPF Utilised Amt (\$\$): _____	
<b>Tenure</b> <input type="checkbox"/> Freehold <input type="checkbox"/> Leasehold _____ years w.e.f. (DD/MM/YYYY) _____		<b>Property Owner</b> <input type="checkbox"/> Company <input type="checkbox"/> Individual  Name of Owner: _____	
<b>Land Area</b> (sqm / sqft*)	<b>Built-in Area</b> (sqm / sqft*)		
<b>Purchase Details</b> Price (\$\$) _____ Date of Purchase (MM/YYYY) _____		<b>#Property Usage</b> <input type="checkbox"/> Owner Occupied (Additional Premise) <input type="checkbox"/> Owner Occupied (Vacating Current Premise) <input type="checkbox"/> Investment Property	
		<b>New Rental Savings/Income</b> \$\$ _____ \$\$ _____ \$\$ _____	
<b>Commercial Property</b> <input type="checkbox"/> HDB Shop Unit <input type="checkbox"/> Medical Suite <input type="checkbox"/> Shophouse <input type="checkbox"/> Office <input type="checkbox"/> Retail Shop Unit <input type="checkbox"/> Coffee Shop		<b>Industrial Property</b> <input type="checkbox"/> Showroom/Warehouse <input type="checkbox"/> Canteen <input type="checkbox"/> Terraced Factory <input type="checkbox"/> JTC <input type="checkbox"/> Flatted/Ramped Up Factory	<b>Residential Property</b> <input type="checkbox"/> Non-Landed <input type="checkbox"/> Landed

COMPANY / BORROWER INFORMATION		
<b>#Registered Business Name</b>		<b>#Company Registration Number:</b> _____
<b>Registered Business Address</b> <input type="checkbox"/> As per ACRA  Postal Code	<b>Mailing Address</b> (If different from registered address)  Postal Code	<b>Constitution Type</b> <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Unlimited Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Others (Please specify):

**COMPANY / BORROWER INFORMATION**

<b>Registered Address Ownership</b> <input type="checkbox"/> Owned <input type="checkbox"/> Rented (Monthly) S\$ _____	<b>Related Party Transactions^ (Non-Trade) in Last 6 months</b> Is there any loan(s) granted to any related party~? <input type="checkbox"/> YES <input type="checkbox"/> NO <b>If Yes, state amount S\$</b> _____ Is there any loan(s) obtained from any related party~? <input type="checkbox"/> YES <input type="checkbox"/> NO <b>If Yes, state amount S\$</b> _____
<b>Business Type</b> (Please select one) <input type="checkbox"/> Wholesaler <input type="checkbox"/> Manufacturer <input type="checkbox"/> Retailer <input type="checkbox"/> Service Provider <input type="checkbox"/> Trader  <b>Business Activity</b> (Please select one) <input type="checkbox"/> Manufacturing <input type="checkbox"/> Transportation/ Storage <input type="checkbox"/> Building & Construction <input type="checkbox"/> Logistics/Warehousing <input type="checkbox"/> Electronics <input type="checkbox"/> Services <input type="checkbox"/> Property <input type="checkbox"/> Professional Practices <input type="checkbox"/> Retail <input type="checkbox"/> F&B /Hospitality <input type="checkbox"/> Others (Please specify): _____  <b>Latest Year Sales Turnover (\$):</b> _____	#A) More than 50% of the total turnover of the Company is derived from Property-related activities. <input type="checkbox"/> YES <input type="checkbox"/> NO #B) More than 50% of the total assets of the Company comprises of interests in or rights over immovable property situate in Singapore, excluding immovable property or any part thereof which is used: i) as premises for any business carried out by the Company ii) for the business of a hotel or hostel; or iii) for community, charity or educational purposes. <input type="checkbox"/> YES <input type="checkbox"/> NO #C) Latest financial reflects business is profit-making (EBITDA >0) <input type="checkbox"/> YES <input type="checkbox"/> NO #D) Latest financial reflects business is positive net-worth (paid up capital + retained earnings) <input type="checkbox"/> YES <input type="checkbox"/> NO

^ The term "related party transaction" shall have the same meaning as defined in the Singapore Financial Reporting Standards.  
 ~ The term "related party" shall have the same meaning as defined in the Singapore Financial Reporting Standards.

**COMPANY / BORROWER MONTHLY EXPENDITURE**

Rental expenses in last 6 months	State amount: S\$ _____ per month Payment from _____ (bank name)	<input type="checkbox"/> Bank Transfers <input type="checkbox"/> GIRO <input type="checkbox"/> Cheque payment
Utilities expenses in last 6 months	State amount: S\$ _____ per month Payment from _____ (bank name)	<input type="checkbox"/> Bank Transfers <input type="checkbox"/> GIRO <input type="checkbox"/> Cheque payment
Salaries expenses in last 6 months (include CPF contributions)	State amount: S\$ _____ per month Payment from _____ (bank name)	<input type="checkbox"/> Bank Transfers <input type="checkbox"/> GIRO <input type="checkbox"/> Cheque payment
Other Overheads: CapEx PURCHASES (Did you purchase or sell any equipment or property or fixed asset in last 6 months? If Yes, please state approximate amount: State amount: S\$ _____ Payment to/from* _____ (bank name)		

**CREDIT FACILITIES & COLLATERAL OWNED USAGE BY COMPANY / BUSINESS / BORROWER**

Name of Bank / FI	Address of Property Owned	CMV(\$)	Limit (\$)	Facility Type	Outstanding Loan Amount (\$)	Monthly Instalment (\$)	Interest Rate (%)	Secured
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No

**DETAILS OF TOP FIVE MAJOR BUYERS**

*\* Applicable only to trade and working capital financing / \* Please attach debtors' aging list where applicable*

Buyers	Name	Country	Years of Relation	Percentage of Sales	Payment Mode	Credit Terms (days)	Related to You
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

**DETAILS OF TOP FIVE MAJOR SUPPLIERS**

*\* Applicable only to trade and working capital financing / \* Please attach debtors' aging list where applicable*

Suppliers	Name	Country	Years of Relation	Percentage of Purchases	Payment Mode	Credit Terms (days)	Related to You
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

**KEYMAN / GUARANTOR 1 / 2 / 3 / 4\* DETAILS**

<b>#Full Name as per NRIC/Passport</b>  <b>Residential Address</b> <input type="checkbox"/> As per NRIC  Postal Code _____  <b>Type of Residence</b> <input type="checkbox"/> Landed <input type="checkbox"/> Private Apartment / Condo <input type="checkbox"/> Executive Condo / HUDC <input type="checkbox"/> HDB  Length of stay (        ) Years  <b>Position in Company</b> <input type="checkbox"/> Managing Director <input type="checkbox"/> Director <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Shareholder <input type="checkbox"/> Partner <input type="checkbox"/> Others  Please specify: _____	<b>#NRIC/Passport Number</b>  <b>Date of Birth</b> (DD/MM/YYYY)  <b>Nationality</b> <input type="checkbox"/> Singaporean <input type="checkbox"/> Singapore PR since _____ (DD/MM/YYYY)  <input type="checkbox"/> Others (please specify): _____  <b>Contact Numbers</b> (Office) _____ (HP) _____  (Email) _____  <b>Residence Ownership</b> <input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged <input type="checkbox"/> Parent's <input type="checkbox"/> Rental (S\$ _____ per month)
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**#PROPERTIES OWNED BY KEYMAN / GUARANTOR 1 / 2 / 3 / 4\***

Address of Property Owned	CMV (S\$)	Total CPF Used (incl. Acc. Int.)	Outstanding Loan Amount (S\$)	Monthly Instalment (S\$)	Existing Interest Rate (%)	Name of Bank

**KEYMAN / GUARANTOR 1 / 2 / 3 / 4\* NETWORTH**

Other Assets	Market Value	Currency	Pledged to Bank
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

**GUARANTOR 1 / 2 / 3 / 4\* DETAILS**

<b>#Full Name as per NRIC/Passport</b>  <b>Residential Address</b> <input type="checkbox"/> As per NRIC  Postal Code _____  <b>Type of Residence</b> <input type="checkbox"/> Landed <input type="checkbox"/> Private Apartment / Condo <input type="checkbox"/> Executive Condo / HUDC <input type="checkbox"/> HDB  Length of stay (        ) Years  <b>Position in Company</b> <input type="checkbox"/> Managing Director <input type="checkbox"/> Director <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Shareholder <input type="checkbox"/> Partner <input type="checkbox"/> Others  Please specify: _____	<b>#NRIC/Passport Number</b>  <b>Date of Birth</b> (DD/MM/YYYY)  <b>Nationality</b> <input type="checkbox"/> Singaporean <input type="checkbox"/> Singapore PR since _____ (DD/MM/YYYY)  <input type="checkbox"/> Others (please specify): _____  <b>Contact Numbers</b> (Office) _____ (HP) _____  (Email) _____  <b>Residence Ownership</b> <input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged <input type="checkbox"/> Parent's <input type="checkbox"/> Rental (S\$ _____ per month)
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**#PROPERTIES OWNED BY GUARANTOR 1 / 2 / 3 / 4\***

Address of Property Owned	CMV (S\$)	Total CPF Used (incl. Acc. Int.)	Outstanding Loan Amount (S\$)	Monthly Instalment (S\$)	Existing Interest Rate (%)	Name of Bank

**GUARANTOR 1 / 2 / 3 / 4\* NETWORTH**

Other Assets	Market Value	Currency	Pledged to Bank
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

## CONFIRMATION OF REFERRAL

### Facility Details

Business Property Loan  Trade Financing (Commercial)  Others: \_\_\_\_\_

### Agent Details

Real Estate Agent  Member-get-member  Insurance Agent  Mortgage Broker  Others \_\_\_\_\_

Agent's Full Name as per NRIC: \_\_\_\_\_

Agent's Company Name in full : \_\_\_\_\_

## DECLARATION

1. I/We confirm that all the information given above and all the declarations in this application are true, complete and correct and shall form the basis of any loan/overdraft/facility (collectively "Credit Facility") that may be granted by United Overseas Bank Limited (the "Bank"). I/we also confirm that I/we have not withheld any material fact/information which shall entitle the Bank to reject such application or withdraw or recall such facilities if it has been granted. I/We shall promptly notify the Bank in writing if any information or declaration given becomes inaccurate or misleading or changes in any way before this application is approved or whilst the Credit Facility is still outstanding. I/We shall supply any additional information and documentary proof as the Bank may require from time to time in connection with this application or the Credit Facility. I/We shall execute all documents and instruments and do all acts and things as may be required by the Bank from time to time in connection with this application and/or Credit Facility.
2. I/We confirm that the Memorandum and Articles of Association of the Company has made a provision for the directors to exercise all the powers of the Company to borrow money.
3. I/We acknowledge that the Bank has the absolute right to approve or reject the application without assigning any reason whatsoever and that the documents accompanying this application shall become and remain the property of the Bank.
4. I/We agree that my/our Credit Facility shall be governed by the terms and conditions of the Bank that are in force and may be amended by the Bank from time to time.
5. I/We confirm that we have read and understood the Bank's Privacy Notice (Corporate) (available at [www.uob.com.sg](http://www.uob.com.sg) and at the Bank's branches) which forms part of the terms and conditions governing our relationship with the Bank. We represent and warrant to the Bank that when providing the Bank with the personal data of the Relevant Individual(s) from time to time, we would have obtained the consent of the Relevant Individual(s) for the collection, use and disclosure of the personal data for Basic Banking Purposes, Co-branding Purpose, Research Purpose and Marketing Purpose as described in the Bank's Privacy Notice (Corporate).
6. I/ We further agree that the Bank may in its sole discretion reject my application without providing any reason and the Bank shall have the discretion to retain all supporting documents submitted by me/us and that I/we shall not claim for return of any of these documents and have no right to appeal against this decision of the Bank.
7. I/We the undersigned hereby authorise and give you consent to conduct credit checks on me/us (including but not limited to checks with any credit bureau recognised as such by the Monetary Authority of Singapore) and obtain, verify from any source and/or disclose or release any information relating to me/us or any of my/our account(s) with you to any other party or source as you may from time to time deem fit at your own discretion and without any liability or notice to me/us for the purpose of this application.
8. This is to confirm that neither the undersigned nor any of our partners, directors are the subject of any litigation proceedings. I/ We further confirm that I/ We do not have any other credit facilities with any other bank apart from the information provided herein. I/We confirm that if I/We obtain any credit facilities with any other bank in the future, I / We will furnish the details to the Bank immediately.
9. We confirm that we have been referred to the bank by the above mentioned Agent and further confirm that the above information is true and accurate and that we have not withheld any material fact.

_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantors  Date: _____	_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantors  Date: _____
_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantors  Date: _____	_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantors  Date: _____

## FOR BANK USE

### BFM/BRM Confirmation on agent Referral:

Referral Agency & Agent are registered on Panel of Registered Referral Agencies & Agents.

Option to Purchase/ Sales & Purchase Agreement are sighted and confirmed that the Agent is employed by the above Agency.

Borrower and Agent/ Agency is not the same person/ entity.

Agency/ Agent is neither the Borrower nor Mortgagor.

There is no relations in any way whatsoever of BFM/BRM to the above named Agency/ Agent.

Name of Processing Officer & Code		Branch & Branch Code	
Name of Marketing Officer & Code		BWCIFNumber	