

APPLICATION FORM (JOINT & SEVERAL LIABILITY)



United Overseas Bank Limited
Tel: 1800 222 2121. Fax: 6253 1181. Website: www.uob.com.sg.
Co. Reg. No. 193500026Z



IMPORTANT: The Bank reserves the right to reject this application without assigning any reasons or giving any prior notice. Please complete all fields. Applications with incomplete information or supporting documents will result in processing delay. All documents will be treated as confidential and will not be returned.

The Applicant ("CardMember") is liable for the total indebtedness of every UOB Card ("Card") issued under the account of the CardMember, and is jointly and severally liable with each proposed CardUser to the Bank in relation to each issued UOB Card.

You may (a) obtain your free credit report within 30 calendar days from the date of approval/rejection of this application at www.creditbureau.com.sg or (b) bring the approval/rejection letter and your NRIC to the Credit Bureau (Singapore) Pte Ltd's registered office - 2 Shenton Way #20-02 SGX Centre 1 Singapore 068804 Tel: (65) 6565 6363

1. CHOICE OF CARD UNDER THE COMMERCIAL CARDS PROGRAMME

Please tick to indicate your choice:

Choice 1* *For add-on card application, choice of cards will be dependent on the current card programme offered to the CardMember.

- | | | |
|---|--------------------------|--|
| <input type="checkbox"/> Mastercard | or | <input type="checkbox"/> VISA |
| <input type="checkbox"/> Rebate [N.A for Virtual Payment Solutions] | or | <input type="checkbox"/> UNIS\$ Programme [N.A for Virtual Payment Solutions] |
| <input type="checkbox"/> Card Plastic (except UOB Virtual Payment Solutions) | or | <input type="checkbox"/> Virtual Card |
| <input type="checkbox"/> UOB Corporate Card
Annual Card Fee (inclusive of GST):
S\$96, 1st year fee waived | <input type="checkbox"/> | <input type="checkbox"/> UOB Platinum Business Card
Annual Card Fee (inclusive of GST):
S\$180, 1st year fee waived |
| | <input type="checkbox"/> | <input type="checkbox"/> UOB Zuellig VISA Business Card
Annual Card Fee (inclusive of GST):
\$180, waived |
| | | <input type="checkbox"/> UOB Virtual Payment Solutions
<input type="checkbox"/> UOB Virtual Card (MM) |

Choice 2*

- UOB Business Plus Card (Mastercard only)** Annual Card Fee (inclusive of GST): S\$96, waived for the first 2 years

*For existing UOB Platinum Business CardUsers, you agree to authorise the cancellation of your current UOB Platinum Business Card (with a 21 days credit term) and for UOB to replace it with a new UOB Platinum Business Card (with a 30 days credit term). Existing UOB Platinum Business Card no.: _____

2. PARTICULARS OF THE APPLICANT ("CARDMEMBER")

Registered Business Name		Business Registration No.	Date of Registration																																
Company Name to be Embossed/ Appeared (within 19 Spaces) - VISA <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>																					Company Name to be Embossed/ Appeared (within 12 Spaces) - Mastercard <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>														
Registered Business Address		Registered Business Name and Registered Business Address of Parent Company, if any																																	
Main Activities	Tel No.	Fax No.	Email Address																																

3. STATEMENT RECIPIENT

CardMember Monthly Summary Statement Name of Recipient <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Mdm <input type="checkbox"/> Ms <input type="checkbox"/> Dr	Position	Mailing Address
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4. STATEMENT OF CARDMEMBER (TO BE SIGNED BY AUTHORISED PERSON(S) OF THE CARDMEMBER)

1. We hereby request United Overseas Bank Limited (the "Bank") to issue a Platinum Business Card or Zuellig VISA Business Card or Corporate Card or Business Plus Card or Virtual Payment Solutions as indicated in this application of the CardMember (collectively, the "Cards", and each a "Card"), to _____ as CardUser, as may be approved by the Bank.

2. We have read, understood and agree to be bound by the Bank's prevailing UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability) (available at www.uob.com.sg/corporatecardstnc).

3. We represent, warrant and declare that:
 (a) all information provided by us in this application and in any other document is true, complete and accurate, and we have not withheld any material fact/information. We undertake that in the event any of the information provided by us becomes inaccurate or misleading or changed in any way, we shall immediately notify the Bank of any such changes in writing; and
 (b) we have verified and are satisfied that any CardUser issued or to be issued with a Card has and will continue to have a minimum annual income of S\$30,000 (for Singaporeans/Permanent Residents) or S\$40,000 (for foreigners).

4. We irrevocably and unconditionally authorise the Bank to conduct credit checks and/or obtain and/or verify any information about us and/or the CardMember as the Bank deems fit from and/or with any person, retain all such information and all supporting documents submitted by us, and disclose all information relating to us and/or the CardMember and/or the CardUser and/or the account(s) of the Cards to any person the Bank deems fit and necessary, including to the parties stated in the terms relating to your rights of disclosure under the prevailing UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability) and to any credit bureau, for the purpose of this application.

5. We acknowledge, confirm and agree that:
 (a) we are fully responsible for all liabilities which may be incurred in respect of all the Cards issued, upon our request, to any person named in this application as CardUser and we are jointly and severally liable with the CardUser in relation to the Cards issued to such CardUser;
 (b) if this application and/or any supporting document(s) are sent or are purported to be sent by me/us to the Bank by fax and/or email, the Bank is authorised by me/us, but is not obliged, to rely and act upon on the copy sent by fax and/or email, without the original, and without any liability to me/us;
 (c) the Bank may, in its sole discretion, choose to either approve or reject this application without providing any reason or prior notice for the Bank's approval or rejection, and we have no right to appeal against such decisions of the Bank;
 (d) any Card issued under the account of the CardMember will be renewed upon its expiry without further reference to us, the CardMember and/or the CardUser unless the account of such card is terminated prior to expiry;
 (e) the CardMember's Constitution / Memorandum and Articles of Association has made provision for the directors to exercise all powers of the CardMember to borrow money;
 (f) neither the undersigned nor any of our partners or directors are subject to any litigation proceedings and that the CardMember is not insolvent or wound up; and
 (g) we will be bound by the Bank's Privacy Notice (Corporate) (available at www.uob.com.sg) 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 CardUser(s) from time to time, we would have obtained the prior consent of the CardUser(s) for the collection, use and disclosure of the personal data in accordance with the Bank's Privacy Notice (Corporate).

6. We agree to hold harmless and to keep the Bank indemnified against all actions, proceedings, liabilities, losses, damages, claims, demands and expenses, including all legal costs and other costs, charges and expenses which the Bank may incur or sustain by reason or in connection with the issuance of the Cards including, without limitation, the Bank acting or carrying out any instructions in relation to such cards/accounts purportedly given to the Bank in whatever form, substance and manner as may be required by or otherwise acceptable to the Bank and however sent, given or transmitted, and whether or not such instructions were unauthorised, inaccurate and/or incomplete.

By signing below, I/we confirm that I/we am/are authorised to sign this application for and on behalf of the CardMember.

1) Name of Authorised Person	2) Name of Authorised Person	Company Stamp
Designation	Designation	
Signature _____ Date _____	Signature _____ Date _____	

FOR BANK USE

Corp ID	Implemented Limit \$	Temp Incr Ind	Billing Cycle 31	CORP IND	Credit Analyst	Approval Signature
CIF No	FD Amount \$	PERM 0 / 3	CORP SUM	CD Face IND	CORPTYP	
Memo Line	CORP LIAB IND J	Auto Call / SMS Y	Officer Code	Org	Type	

5. PARTICULARS OF THE CARDUSER ("CARDUSER")

Credit Limit Required S\$ <small>The Bank reserves the right to grant you a credit limit that is lower than your preferred credit limit indicated above. If the preferred credit limit is not indicated, the Bank will determine at its sole discretion the credit limit to be assigned and the Bank's decision shall be final and binding</small>			Name as in NRIC/ Passport				
Name to be Embossed, including Surname (within 19 Spaces) []			NRIC/ Passport No.		Passport Expiry Date (ddmmyyyy)		
Nationality Other Nationalities Y / N if Yes, please specify:		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (ddmmyyyy)	Highest Education Level		Marital Status	Race
Residential Address (Billing proof is required if residential address on application differs from NRIC or banking records)							
Country of Residence (Country you are currently residing in or intend to reside in, for more than 1 year e.g. Singapore)				Overseas Residential Address (Mandatory for Foreigners)			
Bill to <input type="checkbox"/> Home <input type="checkbox"/> Office		Office Tel No.		Home Tel No.			
Attention:							
Mobile No. (*mandatory for card activation) Country Code Area Code Number - - -			Email Address		Mother's Maiden Name (For emergency identification purpose)		
FIN No.	Employment Pass Expiry Date		Position in Company		Division/ Department Name	Employee ID	
Length of Service (yymm)			Basic Monthly Salary		Annual Salary		
Frequent Flyer Registration (Applicable to UNIS Programme only - linking UOB Card to Frequent Flyer Membership for future conversion of UNIS to miles) My KrisFlyer Membership No. [] My Asia Miles Membership No. []				Applicable if CardUser is not a Singapore Citizen or Singapore Permanent Resident Do you hold a valid pass to live or work in Singapore? If "yes" Please tick the type of pass that you are holding <input type="checkbox"/> Employment Pass <input type="checkbox"/> Entre Pass <input type="checkbox"/> Long-Term Social Visit Pass <input type="checkbox"/> S-Pass <input type="checkbox"/> Student Pass <input type="checkbox"/> Work Permit <input type="checkbox"/> Dependent Pass			

6. STATEMENT OF CARDUSER

- I hereby request the Bank to issue a Card, as may be approved by the Bank, to me.
- I have read, understood and agree to be bound by the Bank's prevailing UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability) (available at www.uob.com.sg/corporatecardstnc).
- I represent, warrant and declare that:
 - all information provided by me in this application and in any other document is true, complete and accurate and I have not withheld any material fact/information. I undertake that in the event any of the information provided by me becomes inaccurate or misleading or changed in any way I shall immediately notify the Bank of any such changes in writing; and
 - I have provided full and complete information in relation to my Nationality including dual/multiple Nationalities if any and I shall inform the Bank in writing of any changes to my Nationality; and
 - at the time of this application I am not an undischarged bankrupt and there has been no statutory demand served on me nor any legal proceeding commenced against me.
- I consent and authorise the Bank to conduct credit checks and/or obtain and/or verify any information about me as the Bank deems fit from and/or with any person, retain all such information and all supporting documents submitted by me, and disclose all information relating to me or the account of the UOB Card issued pursuant to this application to any person as the Bank deems fit, including to the parties stated in the terms relating to your rights of disclosure under the prevailing UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability) and to any credit bureau for the purpose of this application.
- I acknowledge, confirm and agree that:
 - I am jointly and severally liable with the CardMember for all liabilities which are and may be incurred in respect of the Cards that is issued to me and that the Cards will be renewed upon its expiry without further reference to me or the CardMember unless the account of the Cards issued pursuant to this application is terminated before such expiry;
 - the Bank may rely and act on all notices and instructions (whether written or oral) given by the CardMember (whose name and particulars are set out in this application) concerning the Cards issued pursuant to this application, including the termination of the account of the Cards and the Bank shall be entitled to rely on any instruction given by me or the CardMember to terminate the account of the Cards or suspend the use of any of the Cards;
 - the Bank may, in its sole discretion, choose to either approve or reject this application without providing any reason or prior notice for its approval or rejection, and I have no right to appeal against such decisions of the Bank;
 - in addition to the modes and manner you may send notices, statements and communications to me under the prevailing UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability), the Bank may send notices, statements and communications to me in the mode and manner the Bank may deem appropriate to my last known address, fax/telephone/mobile phone number and all notices, statements and communications to be sent or given to me shall be deemed delivered to me if delivered to the CardMember;
 - I will be bound by the Bank's Privacy Notice (Individual) (available at www.uob.com.sg) which forms part of the terms and conditions governing my relationship with the Bank. I consent to the Bank collecting, using and disclosing my personal data obtained from me, the CardMember or from other sources, in accordance with the Bank's Privacy Notice (Individual);
 - the Bank may disclose any information relating to me, and/or the Cards (including transactions thereon) to the CardMember, for purposes of or in connection with the provision of the Cards services to the CardMember or myself; and
 - the Bank or the CardMember may at any time by either party giving at least one (1) month's written notice to the other and without notice to me terminate the Cards or the account of the Cards issued pursuant to this application at their discretion.
- I agree to hold harmless and to keep the Bank indemnified against all actions, proceedings, liabilities, losses, damages, claims, demands and expenses, including all legal costs and other costs, charges and expenses which the Bank may incur or sustain by reason or in connection with the issuance of the Cards including, without limitation, the Bank acting or carrying out any instructions in relation to such cards/ accounts purportedly given to the Bank in whatever form, substance and manner as may be required by or otherwise acceptable to the Bank and however sent, given or transmitted, and whether or not such instructions were unauthorised, inaccurate and/or incomplete.

Signature of CardUser _____ Date _____

FOR BANK USE

Corp ID		Credit Limit \$	Census	Blanket Limit \$	CORP IND	CORPTYP	Credit Analyst	Approval Signature
CIF No		FD Amount \$	Billing Cycle	Auto Call / SMS Y / N	TPIN IND 0 / 1	Officer Code		
Memo Line		MAS Code	Monitor Code	SC IND	PYMT Type	STMT Flag		
FC / LC		PA 9	Freend	Fee Date 01-	PCIH EL4	Exp Date	Org	Type
Existing Credit Limit \$			New Credit Limit \$		Branch		Staff ID	

Should there be any inconsistency between the terms herein and the UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability), the UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability) will prevail.

*Please delete wherever appropriate. *For new card applicants without UOB Personal Internet Banking and Mobile Services ("PIB/MBK"), the mobile phone number provided will be used for SMS-OTPs (One-Time Password), credit card security alerts, and authentication subscriptions. If you already have PIB/MBK, your new card can be accessed with your existing PIB/MBK username and password. If your mobile phone number has since changed and you wish to have it updated, please complete a Change of Address/ Contact Details Form available at uob.com.sg. If you are already an existing UOB Phone Banking customer, your UOB Card will be linked to your current Access Code and PIN. If you are not an existing UOB Phone Banking customer, a new Access Code and PIN will be sent to you upon approval of your UOB Card application.

CERTIFIED TRUE COPY OF RESOLUTIONS PASSED BY THE BOARD OF DIRECTORS OF

_____ (THE "COMPANY")

ON THE _____ DAY OF _____ 20____

IT WAS RESOLVED THAT:

1. The Company be and is hereby authorised to apply for the issuance of corporate card(s) / business card(s), purchasing card(s), central travel lodge card(s), central travel account and / or virtual payment account ("**Card(s)**"), under the United Overseas Bank Limited ("**Bank**") Commercial Cards Programme to the person(s) named in the Application Form(s) ("**Application**") as CardUser(s) which is submitted or to be submitted to the Bank.
2. The Company be and is hereby authorised to approve and agree to accept, adopt, comply with and be bound by (a) the terms and conditions of the Application Form(s) ("**Application**") in respect of the Card(s), (b) the prevailing UOB Corporate Cardmember Agreement (Sole Corporate Liability / Joint & Several Liability) OR UOB Corporate Cardmember Agreement (Personal Liability)* ("**Standard Terms**") (as may be amended, supplemented and / or substituted from time to time by the Bank), (c) the facility letter issued by the Bank to the Company relating to credit facilities to be granted by the Bank (as lender) and the Company (as borrower) under the Bank's Commercial Cards Programme (the "**Facility Letter**"), (d) any security document(s) to be executed in favour of the Bank to guarantee, secure or otherwise assure the performance of the Company's obligations under or in connection with the Facility Letter (including but not limited to the Letter of Charge and Set-Off) and (e) all other terms and conditions as the Bank may prescribe from time to time (collectively, the "**UOB Agreements**").
3. Any _____ of the following directors or officers ("**Authorised Person(s)**") of the Company listed in this Paragraph 3, be and is hereby authorised, for and on behalf of the Company, to:-
 - (a) apply, from time to time, for the issuance of the Card(s) to CardUser(s);
 - (b) approve, agree and accept all the terms and conditions of the UOB Agreements;
 - (c) sign or otherwise execute and deliver (i) the Application (and provide the statements therein), (ii) each of the UOB Agreements (where required) which is not a deed, and (iii) any related documents that is not a deed and any forms, notices, instruments and all documents in connection with, incidental or ancillary to the UOB Agreements, in each cash, in such form and substance prescribed by and satisfactory to the Bank;
 - (d) accept, sign or otherwise execute, deliver and issue all communications, notices, reports, information and documents (in such form and substance prescribed by and satisfactory to the Bank); and
 - (e) do all acts, matters, things, negotiate and / or instruct on any matter (including, granting consent to the Bank to use the Company's name, logo and / or mark for the customisation of Card(s) in accordance with the UOB Agreements),

as may be necessary pursuant to and / or in connection with the UOB Agreements and / or Cards.

S/N	Name of Authorised Person(s)	NRIC / Passport No.	Specimen Signature
1.			
2.			

S/N	Name of Authorised Person(s)	NRIC / Passport No.	Specimen Signature
3.			
4.			

4. The CardUser(s) be and are hereby authorised and empowered, for and on behalf of the Company, to conduct any transactions on the Card(s) whether such transactions are conducted by:
 - (a) the CardUser's signature;
 - (b) electronic means (including the use of any PINS, telephones or computer terminals); or
 - (c) any other means or services made available from time to time to the Company / CardUser by the Bank.
5. If the Sole Corporate Liability / Joint & Several Liability Commercial Cards Programme applies, the Company shall bear and pay to the Bank, and the Bank be authorised to debit from the Company's account(s) all payments and withdrawals made through the use of any and all Card(s) as well as any and all costs, expenses and other sums which the Company is liable to pay the Bank pursuant to the UOB Agreements.
6. The Bank be authorised to complete all such banking transactions requested through the use of PIN(s) including making credits to, debits or transfers from the Company's account(s) and any other banking transactions which the Bank together with any third party may make available to PIN holders from time to time whether such account(s) be in credit or overdrawn or may become overdrawn in consequence of such debts.
7. These Resolutions shall remain in full force and effect and the Bank may rely on these Resolutions and any notices and / or instructions, which the Bank believes to have been made or given by or on behalf of the Company whether given orally or by means of fax / telephone / email or any other form of electronic communication acceptable by the Bank, given by such Authorised Person(s) until the Bank has received and accepted to be in order, written notice of amendment or revocation of the mandates granted under these Resolutions and has had at least seven (7) business days (from date of Bank's receipt) to give effect to such notice of amendment or revocation. Before the Bank has processed any such notice of amendment or revocation, the Bank may act in reliance on the mandates in force prior to the processing of any such notice of amendment or revocation.
8. As between the Company and the Bank, any one Director and Company Secretary or any two Directors or such person(s) authorised by the Company's constitutive documents, be and is hereby authorised to certify to the Bank:-
 - (a) the list of Authorised Person(s) and all details and particulars which includes NRIC / Passport No., designations or titles and specimen signature; and
 - (b) a true copy or extract of any resolution passed by the Company (including this Resolutions) in connection with the Card(s) and such certification may be relied upon by the Bank as conclusive evidence of the passing of the resolutions so certified.
9. The execution of the security document(s) and any related document in connection with, incidental or ancillary to the UOB Agreements as a deed (if required) be authorised and that this be effected in accordance with Section 41B of the Companies Act, Chapter 50 of Singapore by (i) any Director signing that document in the presence of a witness who attests the signature; (ii) any two Directors signing that document; or (iii) any Director and any Company Secretary signing that document, each such signatory signing the document on behalf of the Company with any amendments, alterations, variations or modifications as any Director of the Company may approve (such execution to constitute approval of any such amendment, alteration, variation or modification).
10. These Resolutions and the authority and powers given to each person in these Resolutions shall continue with full force and effect to bind the Company vis-à-vis the Bank, until the Bank receives a certified true copy of the Resolutions of the Board of Directors of the Company revoking these Resolutions or any such authority and power or providing otherwise.

11. Authority be and is hereby given to the Company to ratify, confirm and adopt and the Company do hereby ratify, confirm and adopt all previous acts done in connection with, incidental to or pursuant to or arising from any of the aforesaid matters.

Unless otherwise defined herein, all capitalised terms used herein shall have the same meaning as defined in the Standard Terms.

Dated this _____ day of _____ 20_____

CERTIFIED AS TRUE AND CONFIRMED THAT THESE RESOLUTIONS HAVE BEEN ADOPTED AND HAVE NOT BEEN RESCINDED, MODIFIED OR SUPERSEDED

Director
Name:

*Director / Company Secretary
Name:

**Delete if inapplicable*

BUSINESS BANKING FACILITIES APPLICATION FORM

CREDIT FACILITIES REQUESTED					
Facility Type	Amount(S\$)	Tenure	Facility Type	Amount(S\$)	Tenure
Trade (LC/TR)			Mortgage Loan against Property		
Overdraft		N.A	Overdraft against Property		
Banker's Guarantee			Equity Loan against Property		
Bridging Loan/Micro Loan*			Standby letter of Credit		
Unsecured Term Loan			Foreign Exchange Line		
LIS Trade(LC/TR)			Others (please specify):		
Commercial Credit Cards		N.A			

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

COLLATERAL INFORMATION			
<i>* Where applicable</i>			
Collateral Type	Currency	Amount	Remarks
Fixed Deposit			
Structured Deposit			
Unit Trust			
Standby Letter of Credit (SBLC)			
Others (Please Elaborate)			
Property (Please complete below section)			
Property Address (where property is pledged as collateral) Postal Code: _____		#Purpose <input type="checkbox"/> New Purchase <input type="checkbox"/> Pledged as Collateral (Fully Paid) <input type="checkbox"/> Re-finance from other Bank or Financial Institution Outstanding Amount (S\$) _____ CPF Utilised Amt(S\$): _____	
Tenure <input type="checkbox"/> Freehold <input type="checkbox"/> Leasehold _____ years w.e.f. (DD/MM/YYYY) _____		Property Owner <input type="checkbox"/> Company <input type="checkbox"/> Individual Name of Owner: _____	
Land Area (sqm / sqft*)	Built-in Area (sqm / sqft*)		
Purchase Details Price (S\$) _____ Date of Purchase (MM/YYYY) _____		#Property Usage <input type="checkbox"/> Owner Occupied (Additional Premise) <input type="checkbox"/> Owner Occupied (Vacating Current Premise) <input type="checkbox"/> Investment Property	
		New Rental Savings/Income S\$ _____ S\$ _____ S\$ _____	
Commercial Property <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		Industrial Property <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	Residential Property <input type="checkbox"/> Non-Landed <input type="checkbox"/> Landed
Completion Status <input type="checkbox"/> Completed, <input type="checkbox"/> BUC, expected TOP date: _____			

* Customer counter-signing required for any amendments made * Please delete where inapplicable.

COMPANY / BORROWER INFORMATION

#Registered Business Name	#Company Registration Number:
Registered Business Address <input type="checkbox"/> As per ACRA <div style="text-align: right;">Postal Code _____</div>	Constitution Type <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Unlimited Partnership <input type="checkbox"/> Others (Please specify): _____
Mailing Address (if different from registered address) <div style="text-align: right;">Postal Code _____</div>	Registered Address Ownership <input type="checkbox"/> Owned <input type="checkbox"/> Rented (Monthly) S\$ _____
Business Type (Please select one) <input type="checkbox"/> Wholesaler <input type="checkbox"/> Manufacturer <input type="checkbox"/> Retailer <input type="checkbox"/> Service Provider <input type="checkbox"/> Trader Business Activity (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): _____ Latest Sales Turnover: S\$ _____	#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

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

Name of Bank / FI	Address of Property Owned	CMV(S\$)	Limit (S\$)	Facility Type	Outstanding Loan Amount (S\$)	Monthly Instalment (S\$)	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
								<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*

	Name	Country	Years of Relation	Percentage of Sales	Payment Mode	Credit Terms (days)	Related to You
Buyers							<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*

	Name	Country	Years of Relation	Percentage of Purchases	Payment Mode	Credit Terms (days)	Related to You
Suppliers							<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

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

#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

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

#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 & Loan Insurance Scheme) Government Assistance Scheme: Micro Loan Programme

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 the information given above is true and correct and shall form the basis of any loan/overdraft/facility (collectively "Credit Facility") granted by United Overseas Bank (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.
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 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. I/We the undersigned hereby authorize and give the Bank my/our irrevocable consent to obtain information such as business location, platform registration information, transaction data (including but not limited to historical sales, order counts and sales revenue), seller rating and performance and such other relevant information relating to us from the Bank's collaborating partner and/or its affiliated companies for the purposes of evaluating this application and for portfolio monitoring purposes should this application be approved. Consequently, I/We consent to such collaborating partner and/or its affiliated companies disclosing the abovementioned information it has about us to the Bank;
9. 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.
10. 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 / Guarantor Date: _____	_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantor Date: _____
_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantor Date: _____	_____ (Signature) Name of authorised signatory of Company / Borrower / Guarantor 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	



UOB Biz Hub (Commercial Cards) Enrolment Form

To: UOB Commercial Solutions, Cards & Payments

Email: CommCards.ClientService@UOBgroup.com

Address: 480 Toa Payoh Lorong 6, #24-00 HDB Hub East Wing, Singapore 310480

Note: The information/details provided are used for the creation and access to the UOB Biz Hub (Commercial Cards) portal only and will not supersede your contact details in the UOB's records. User ID and Password to access the UOB Biz Hub (Commercial Cards) portal will be sent via e-mail to the User.

Particulars of the Applicant ("CardMember")																										
Registered Business Name:																										
Business Registration No:																										
Biz Hub Access Role																										
Request Type																										
<input type="checkbox"/> New User	<input type="checkbox"/> Deactivate User	<input type="checkbox"/> Unlock Access	<input type="checkbox"/> Others _____																							
<input type="checkbox"/> Corporate Administrator (<i>Authorised Person - create and/or approve requests/transactions</i>)																										
<input type="checkbox"/> Corporate Administrator (<i>create / maintain all Cardusers' access</i>)																										
<input type="checkbox"/> CardUser (<i>view account details and/or raise request(s) for his own card account</i>)																										
1. Particulars of Corporate Administrator / CardUser [delete where applicable] ("User")																										
Full Name:		Card Number: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <i>If you own more than 1 UOB Corporate Card under the same Registered Business Name, all your other card(s) will be linked to this portal.</i>																								
Office Tel: + _____ <small>(Country Code) (Area Code) (Number)</small>		Mobile No: + _____ <small>(Country Code) (Area Code) (Mobile Number)</small>																								
Email Address (mandatory):																										
2. Particulars of Corporate Administrator / CardUser [delete where applicable] ("User")																										
Full Name:		Card Number: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <i>If you own more than 1 UOB Corporate Card under the same Registered Business Name, all your other card(s) will be linked to this portal.</i>																								
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Email Address (mandatory):																										
3. Particulars of Corporate Administrator / CardUser [delete where applicable] ("User")																										
Full Name:		Card Number: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <i>If you own more than 1 UOB Corporate Card under the same Registered Business Name, all your other card(s) will be linked to this portal.</i>																								
Office Tel: + _____ <small>(Country Code) (Area Code) (Number)</small>		Mobile No: + _____ <small>(Country Code) (Area Code) (Mobile Number)</small>																								
Email Address (mandatory):																										

STATEMENT OF USER

1. I request and authorise the Bank to grant me access to UOB Biz Hub (Commercial Cards).
2. I accept and agree to be bound by the prevailing UOB Biz Hub (Commercial Cards) Terms of Use (available at <https://bizhub-ccpsg.uobgroup.com>).
3. I represent and warrant that all information provided by me in this form is true, complete and accurate in all respects.
4. I agree not to hold the Bank liable for any loss or damage which I may suffer or incur arising out of or in connection with: (a) my access to and/or use of UOB Biz Hub (Commercial Cards) or (b) any error or omission in this form.
5. I agree to hold harmless and keep the Bank indemnified against all actions, proceedings, liabilities, losses, damages, claims, demands and expenses (including without limitation legal costs on a full indemnity basis) which the Bank may incur or sustain by reason or in connection with (a) my access to and/or use of UOB Biz Hub (Commercial Cards) or (b) any error or omission in this form.
6. I acknowledge and agree to be bound by the Bank's Privacy Notice (Individual) (available at www.uob.com.sg) which forms part of the terms and conditions governing my relationship with the Bank. I consent to the Bank collecting, using and disclosing my personal data obtained from me, the CardMember or from other sources, in accordance with the Bank's Privacy Notice (Individual).

<p>_____ 1. Signature of User</p> <p>Name: Date:</p>	<p>_____ 2. Signature of User</p> <p>Name: Date:</p>	<p>_____ 3. Signature of User</p> <p>Name: Date:</p>
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STATEMENT OF CARDMEMBER (TO BE SIGNED BY AUTHORISED PERSON(S) OF THE CARDMEMBER)

1. We request and authorise the Bank to grant the User(s) access to UOB Biz Hub (Commercial Cards).
2. We accept and agree to be bound by the prevailing UOB Biz Hub (Commercial Cards) Terms of Use (available at <https://bizhub-ccpsg.uobgroup.com>).
3. We represent and warrant that: (a) the User(s) have been properly authorised by us to access and use UOB Biz Hub (Commercial Cards); and (b) all information submitted by us in connection with this form is true, complete and accurate in all respects.
4. We agree not to hold the Bank liable for any loss or damage which we or any User may suffer or incur arising out of or in connection with: (a) any User's access to and/or use of UOB Biz Hub (Commercial Cards) or (b) any error or omission in this form.
5. We agree to hold harmless and keep the Bank indemnified against all actions, proceedings, liabilities, losses, damages, claims, demands and expenses (including without limitation legal costs on a full indemnity basis) which the Bank may incur or sustain by reason or in connection with (a) any User's access to and/or use of UOB Biz Hub (Commercial Cards) or (b) any error or omission in this form.
6. We acknowledge and agree to be bound by the Bank's Privacy Notice (Corporate) (available at www.uob.com.sg) 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 User(s) from time to time, we would have obtained the prior consent of the User(s) for the collection, use and disclosure of the personal data in accordance with the Bank's Privacy Notice (Corporate).

By signing below, I/we confirm that I/we am/are authorised to sign this form for and on behalf of the CardMember:

Authorised Person(s)

--	--

Name/Signature/Date (Authorised Person)¹

Name/Signature/Date (Authorised Person)¹

¹A person (either alone or joint with another person/persons) authorised by the CardMember and whom the Bank has approved, to act for or on the CardMember's behalf to give any instruction, execute or sign any document or operate the CardMember's Card Account.

For Bank Use Only

Attended by Name/Signature/Date	Checked by Name/Signature/Date	Approved By: Team Leads, Commercial Cards Name/Signature/Date
<input type="checkbox"/> Signature verified <input type="checkbox"/> Document checked		<input type="checkbox"/> User creation date _____ <div style="text-align: right; font-size: small;">dd/mm/yyyy</div>

UOB – Sanctions Questionnaire (Corporates)

United Overseas Bank Limited (“UOB”), its branches in and outside Singapore and subsidiaries (“UOB Group entities”) are committed to complying with the sanctions laws and regulations (“sanctions laws”) imposed by Singapore, the United Nations Security Council, the European Union, the U.S. Department of the Treasury’s Office of Foreign Assets Control or any other applicable regulatory or supervisory authority or body. UOB endeavours to understand the extent of its clients’ activities with certain locations identified in the public domain that may increase UOB sanctions risks. The purpose of this form is to ask questions which help identify and understand the nature of any sanctions exposure.

Legal Entity Name:	Name of Individual(s) & Designation :						
	Name of Relationship Manager:						
	Date:						
Section A: Sanctions Exposure <i>If yes to any of the below questions, please provide more information to the corresponding Section below each question.</i> Sanctioned Countries/Jurisdictions: Iran, North Korea, Syria, Sudan, Crimea Region and Cuba							
1. Is/Are the company or company’s counterparties ¹ <ul style="list-style-type: none"> Incorporated; or have any offices in the above Sanctioned Countries/Jurisdictions? 							<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, details of company or company’s counterparties who is incorporated or have offices in the above Sanctioned Countries/ Jurisdictions.							
2a. Does the company have any business activities or transactions in the above Sanctioned Countries/Jurisdictions? If Yes, provide details in the below and complete Section 2b. If No, please proceed to Section 3.							<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Note: Please indicate the annual percentage of contribution derived in each Sanctioned Country/Jurisdiction relative to company’s total revenue/purchases/assets.</i> <i>An example of exposure calculation:</i> <i>FY2018: Sales to Iran: SGD 1million; Total company revenue: SGD 100million</i> <i>Percentage of exposure: SGD1million / SGD 100million = 1%</i>							
Sanctioned Countries/ Jurisdictions	North Korea	Iran	Syria	Sudan	Crimea Region	Cuba	Total
Percentage of Exposure (%)							

2b. Details of transaction flows of the business activities relating to the Sanctioned Countries/Jurisdictions directly or indirectly, including currency(ies), name of all counterparties, underlying vessels, goods). Any UOB products and services involved in such activities?

3. Does the company have any upcoming or future business plans with the above Sanctioned Countries/Jurisdictions?

Yes No

If Yes, information relating to the Business plan, including timeline, name of all counterparties, activities involved, transaction flows. Any UOB products and services to be involved in such activities?

4. Does the company have connected/related parties², who are citizens of, reside, or operate/have business activities in the above Sanctioned Countries/Jurisdictions?

Yes No

If Yes, provide details including full name of individuals and role in the company, country of citizenship and residency. Full details of Legal entity including the business activities involved and location of incorporation and operations. What is the relationship with the company?

<p>5. Is/Are the company, company's connected/related parties² or company's counterparties¹</p> <ul style="list-style-type: none"> • Currently sanctioned⁴; or • Have any business dealings/transactions with parties and/or activities³ that are sanctioned⁴ 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If Yes, details of Sanctioned party name, location. Any applicable license (General/Specific)? How are UOB products and services involved in these activities?</p>	

¹Counterparties refers to suppliers, buyers, agents, brokers or distributors.

²Connected/Related parties refer to individuals/entities such as company's subsidiaries, affiliates, beneficial owners, shareholders, directors, Key Senior Managements (Chairman, President, CEO, CFO, COO) and authorized signatories

³Sanctioned Activities refer to activities that would violate a law or regulation of any country

⁴Sanctions programs administered by sanctions administration bodies such as OFAC, UN, EU, UK, MAS or applicable host country sanctions laws includes Sectoral Sanctions (Russia and Venezuela), or Targeted Sanctions (Belarus and Zimbabwe)

<p>Details of Sanctions Exposure(s) - Additional Information, if any.</p>
<p> </p>

Section B: Enhance Due Diligence Exposure Checks	
If yes to any of the below questions, please provide more information to the corresponding Section below each question.	
1. Does the company or company's counterparties ¹ have any offices, business activities, shipments (Inc. trans-shipment) or transactions in Liaoning Province (China) ⁵ , Jilin Province (China) or Middle East Region ⁶ ?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
If Yes, provide full office addresses of company and all counterparties in Liaoning Province ⁵ , Jilin Province and Middle East Region ⁶ Details of business activities, including and not limited to, shipments details (including transshipments), vessel names, underlying goods, transactions flows (including all banks involved), currency involved, names of all counterparties relating to the above.	
2. Does the company or company's counterparties ¹ maintain any relationship with Financial Institutions in Liaoning Province (China) ⁵ , Jilin Province (China) and Middle East Region ⁶ ?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
If Yes, provide details of company or/and company's counterparties Financial Institutions (FIs) in Liaoning Province ⁵ , Jilin Province and Middle East Region ⁶ , including the name of the FIs, role of FIs and involvement of UOB.	
3. Does the company transact, send or receive payments on behalf of an unrelated 3 rd party?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
If Yes, provide details of business/ commercial rationale of on-behalf of transactions for unrelated 3 rd party. Include full name of the third parties, relationship between the company and the 3 rd parties involved, details of transactions flows and how is UOB involved in these transactions.	
4. Does the company share the same office address, telephone numbers, beneficial owners, authorised signatories, employees with an unrelated 3 rd party?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
If Yes, what is the rationale of the above arrangement?	

⁵ Liaoning Province refer to cities Dalian, Dandong, Jinzhou, Shenyang as identified in US FINCEN report (https://www.fincen.gov/sites/default/files/advisory/2017-11-02/DPRK%20Financing%20Advisory%20FINAL%201022017_0.pdf)

⁶ Middle East Region refers to United Arab Emirates, Oman and Qatar

Section C: Customer's Confirmation and Acceptance

- I/we confirm that all information provided above is correct and true.

- I/we undertake that I/we will not transact any business or activities through my/our accounts or services with UOB, that directly or indirectly involve or benefit any person or entity located in a Sanctioned Country/Jurisdiction or, with any jurisdiction, state, entity, vessel or individual, designated as a sanctioned entity.

- I/we shall notify the Bank immediately if any representation, undertaking or confirmation contained herein, or any information provided, becomes, or is likely to become untrue or inaccurate in whole or in part, at any time.

Name of Individual(s) & Designation:

Signature(s):

Date: