

Declaration of beneficial ownership

To: **The Hongkong and Shanghai Banking Corporation Limited ("the Bank") Singapore Office**

Details of Partnership

Name of Partnership: _____ ("the Company")

Company registration no.: _____

Country of incorporation: _____

Note: All individuals who are ultimately entitled to control or exercise the control of 10% or more of the voting rights of the company, either directly or indirectly through their beneficial ownership of an underlying corporate shareholder, should be regarded as Principal Shareholders/Beneficial Owners of the Partnership.

1. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):

NRIC/Passport no.:

Ownership (%):

Designation/Occupation:

If the required information is contained in the document(s) of proof appended, please box. Otherwise, please provide details.

Former/Other name (Alias) _____ Date of birth _____

Country of nationality _____

Country of citizenship _____

Country of source of wealth _____

Residential address _____

Permanent address (if different from residential address) _____

Previous residential address for past 3 years (if applicable) _____

2. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):

NRIC/Passport no.:

Ownership (%):

Designation/Occupation:

If the required information is contained in the document(s) of proof appended, please box. Otherwise, please provide details.

Former/Other name (Alias) _____ Date of birth _____

Country of nationality _____

Country of citizenship _____

Country of source of wealth _____

Residential address _____

Permanent address (if different from residential address) _____

Previous residential address for past 3 years (if applicable) _____

3. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):

NRIC/Passport no.:

Ownership (%):

Designation/Occupation:

If the required information is contained in the document(s) of proof appended, please box. Otherwise, please provide details.

Former/Other name (Alias) _____ Date of birth _____

Country of nationality _____

Country of citizenship _____

Country of source of wealth _____

Residential address _____

Permanent address (if different from residential address) _____

Previous residential address for past 3 years (if applicable) _____

Note: All individuals who are ultimately entitled to control or exercise the control of 10% or more of the voting rights of the company, either directly or indirectly through their beneficial ownership of an underlying corporate shareholder, should be regarded as Principal Shareholders/Beneficial Owners of the Partnership.

4. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):

NRIC/Passport no.:

Ownership (%):

Designation/Occupation:

If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.

- Former/Other name (Alias) _____ Date of birth _____
- Country of nationality _____
- Country of citizenship _____
- Country of source of wealth _____
- Residential address _____
- Permanent address (if different from residential address) _____
- Previous residential address for past 3 years (if applicable) _____

Declaration:

1. We hereby declare that the above is a complete and accurate disclosure of the percentage of investment in the Business ("Investment") held by each of the beneficial owners.
2. We confirm that the remaining shares which are not declared above are held by individuals who exercise and control less than 10% of voting rights of the Business.
3. We undertake to notify the Bank immediately, in writing, of any change in the beneficial ownership of the Investment or in the information provided above. The term "change" would include but is not limited to Investment which are sold, assigned, delivered or transferred (whether by operation of law or otherwise), new or increase in Investment, addition of new partners and changes to the proportion of Investment beneficially held.

Signed by:

Dated this _____ day of _____.

All beneficial owners of the Business

<input type="checkbox"/> S.V.	<input type="checkbox"/> S.V.
_____ Name/Designation:	_____ Name/Designation:
<input type="checkbox"/> S.V.	<input type="checkbox"/> S.V.
_____ Name/Designation:	_____ Name/Designation:

Form of mandate for adoption by a Partnership

To: **The Hongkong and Shanghai Banking Corporation Limited ("the Bank") Singapore Office**

Application for BusinessVantage account and other accounts and services

Name of Firm: _____ ("the Firm")

BusinessVantage account, other accounts and services

1. We, the undersigned, being the present individual partners trading or practising for the time being under the style or in the name of the Firm hereby apply to the Bank for accounts and services offered by the Bank from time to time.

Opening, closing and conversion of account(s)

2. That the accounts as set out below be opened, closed, converted and/or continued with the Bank from time to time as directed by the authorised signatories as set out in the schedule (the "Authorised Signatories") in accordance with the signing arrangements set out in paragraph 15 below.
 - a) a BusinessVantage account be opened; and/or
 - b*) the Firm's existing current account number _____ be converted into a BusinessVantage account with the same account number maintained; and/or
 - c) time deposit accounts be opened and/or continued; and/or
 - d) any other accounts that the Firm may require and the Bank may provide, be opened from time to time.

All of the Firm's accounts with the Bank shall be referred to collectively as "Accounts".

3. That the Authorised Signatories as specified in the signing arrangement set out in paragraph 15 below be and are hereby authorised to sign, on behalf of the Firm, the application forms and the Trade Financing General Agreement which were produced and reviewed at the meeting and any other forms, documents, notices or statements in relation to the accounts and services as defined below, required from the Firm by the Bank from time to time, and to communicate or deal with the Bank on the Firm's behalf generally.

Operation of account(s)

4. That the Bank be instructed to honour and comply with all cheques, promissory notes and other orders drawn, and all bills accepted on behalf of the Firm, whether in credit or overdrawn, to comply with all directions given for or in respect of any Accounts on behalf of the Firm and to accept and act upon all receipts or monies deposited with or owing by the Bank on any Accounts in the name of the Firm, provided that such cheques, promissory notes, orders, bills, directions or receipts are signed by the Authorised Signatories in accordance with the signing arrangements set out in paragraph 15 below.

Application of service(s)

5. That the Authorised Signatories as specified in signing arrangement set out in paragraph 15 below be authorised to:
 - a) apply for SMS Alert service ("SMS"), Corporate PhoneBanking ("CPB"), Trade Finance (Services) and such other services that the Bank may offer from time to time (hereinafter referred to collectively as "the Services") and nominate such persons as indicated on the Application Form to utilise the Services, and the Firm will be responsible for all transactions effected through the use of the Services, whether or not they are carried out by the persons nominated;
 - b) change any of the instructions given to the Bank in relation to the Services contained in the Application Form in writing including but not limited to nominating new accounts for the Services;
 - c) change the list of authorised persons/users, including but not limited to nominated users, for the relevant Services (whether by addition or deletion of names) in writing;
 - d) specify or amend the limits and/or nature of transactions each authorised person and/or nominated user is authorised to perform through use of the Services and/or with the CPB-PINs;
 - e) apply for any new services the Bank makes available from time to time; and
 - f) generally give the Bank any other written instructions or consents in connection with the Services.

Terms and conditions

6. That each partner has reviewed and approved all the relevant terms and conditions governing the above accounts and services (hereinafter referred to collectively as "Terms and Conditions"), copies of which are produced at the meeting, and agrees that the Firm will observe and comply with the Terms and Conditions.

Security documents, indemnities and others

7. That the Authorised Signatories as specified in the signing arrangement set out in paragraph 15 below be hereby authorised to arrange with the Bank for advances to the Firm by way of discount, loan, overdraft or otherwise, and for the issue of guarantees by the Bank from time to time as required, and to sign on behalf of the Firm any form of deposit and withdrawal, Memorandum of Deposit, Letter of Trust, Mortgage, Hypothecation and Pledge relating to any securities or property or documents of title relating thereto to secure the said advances and any obligations, undertakings, instructions, guarantees, indemnities and counter-indemnities, and any other documents which may be required by the Bank in connection with any services availed and/or facilities granted by the Bank to the Firm.
8. Where the Trade Finance (Services) Application is completed, that the signatories as specified in the signing arrangement set out therein be hereby authorised to issue written instruction and to execute all relevant documents (including but not limited to the documents referred to in paragraph 7 above) in connection with the trade transactions described in the Trade Finance (Services) Application.

General

9. That the Bank be forthwith supplied with a copy of the Firm's constitutional documents and a copy of each amendment thereto as soon as the same has been passed.
10. That: (a) the Bank be supplied with a list of names, personal details and specimens of the signatures of all the Authorised Signatories stipulated in the Schedule and all its partners; (b) the Bank be informed from time to time in writing signed by any two partners of any changes to the personal details of the above individuals; (c) the Bank be informed from time to time in writing signed by any two partners of any changes to the list of Authorised Signatories and to provide personal details and specimens of the signatures of such individuals; and (d) the Bank be entitled to act upon such notice until the receipt of further notice signed by any two partners.
11. That in the absence of any directions to the contrary, all accounts subsequently opened shall be operated and dealt with upon the terms set out above insofar as the same may be applicable.
12. We agree that nothing in the arrangements between the Bank and the Firm shall be treated as constituting an implied agreement restricting or negating any lien, pledge, charge, right of set-off or other right the Bank may have existing or implied by law.
13. Upon any partner ceasing to be a member of the Firm by death or otherwise, the Bank may, in the absence of written notice to the contrary from us or any of us or the legal executors, personal representatives or trustees of the outgoing partner, treat the surviving or continuing partner or partners or other partner or partners for the time being as having full power to carry on the business of the Firm and to deal with its assets as freely as if there had been no change in the Firm.
14. This mandate shall remain in force until revoked in writing by us (and where applicable the personal legal representatives or trustees of us), notwithstanding any change in the constitution or name of the Firm and shall apply notwithstanding any change in the membership of the Firm by death, bankruptcy, retirement or otherwise or the addition of any new partner or partners.

Signing arrangements for accounts and services

15. That the following signing arrangements shall apply:
(a) in respect of instructions in relation to paragraphs 2, 3 (Opening, closing and conversion of account(s)), 5 (Application of service(s)) and 7 (Security documents, indemnities and others) above, the Authorised Signatories to open and close accounts and to apply for services and execute security documents underhand:

Singly

Any two jointly

Others (please state signing arrangement only, no monetary limits should be stated here):

(b) in respect of instructions in relation to paragraph 4 (Operation of account(s)) above, the Authorised Signatories to operate the accounts in the following manner:

Singly

Any two jointly

Others (please state limits and signing arrangement):

- 16.* The mandate given by the Firm in respect of the pre-existing accounts listed below (excluding existing current account to be converted into a BusinessVantage account under this mandate) _____ ("Pre-Existing Accounts"), shall be revoked and the Pre-Existing Accounts shall be operated and dealt with in accordance with paragraph 4 of these resolutions. For the avoidance of doubt, cheques issued prior to the date on which the Bank gives effect to these resolutions shall be dealt in accordance with the terms of the mandate for the Pre-Existing Accounts.
- 17.* Where the Firm converts an existing current account ("Old Account") into a BusinessVantage account, the mandate given by the Firm to the Bank in respect of the Old Account shall be revoked on, and this mandate shall be effective as of the date of conversion. For avoidance of doubt, cheques issued prior to the date of conversion shall be dealt with in accordance with the terms of the mandate for the Old Account.

Dated this _____ day of _____.

Signed by all the partners of the Firm named above.

S.V.

S.V.

Partner

Partner

S.V.

S.V.

Partner

Partner

Important: All amendments must be initialed by all Partners.

Authorised signatories - Schedule

1. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):		<input type="checkbox"/> Authorised signatory <input type="checkbox"/> Partner
NRIC/Passport no.:	Designation/Occupation:	
If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.		Signing group (if any):
<input type="checkbox"/> Former/Other name (Alias) _____ <input type="checkbox"/> Date of birth _____ <input type="checkbox"/> Country of nationality _____ <input type="checkbox"/> Country of citizenship _____ <input type="checkbox"/> Country of source of wealth _____ <input type="checkbox"/> Residential address _____ <input type="checkbox"/> Permanent address (if different from residential address) _____ <input type="checkbox"/> Previous residential address for past 3 years (if applicable) _____		Signature: S.V.
2. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):		<input type="checkbox"/> Authorised signatory <input type="checkbox"/> Partner
NRIC/Passport no.:	Designation/Occupation:	
If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.		Signing group (if any):
<input type="checkbox"/> Former/Other name (Alias) _____ <input type="checkbox"/> Date of birth _____ <input type="checkbox"/> Country of nationality _____ <input type="checkbox"/> Country of citizenship _____ <input type="checkbox"/> Country of source of wealth _____ <input type="checkbox"/> Residential address _____ <input type="checkbox"/> Permanent address (if different from residential address) _____ <input type="checkbox"/> Previous residential address for past 3 years (if applicable) _____		Signature: S.V.
3. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):		<input type="checkbox"/> Authorised signatory <input type="checkbox"/> Partner
NRIC/Passport no.:	Designation/Occupation:	
If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.		Signing group (if any):
<input type="checkbox"/> Former/Other name (Alias) _____ <input type="checkbox"/> Date of birth _____ <input type="checkbox"/> Country of nationality _____ <input type="checkbox"/> Country of citizenship _____ <input type="checkbox"/> Country of source of wealth _____ <input type="checkbox"/> Residential address _____ <input type="checkbox"/> Permanent address (if different from residential address) _____ <input type="checkbox"/> Previous residential address for past 3 years (if applicable) _____		Signature: S.V.

4. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):		<input type="checkbox"/> Authorised signatory
NRIC/Passport no.:	Designation/Occupation:	<input type="checkbox"/> Partner
<p>If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.</p> <input type="checkbox"/> Former/Other name (Alias) _____ <input type="checkbox"/> Date of birth _____ <input type="checkbox"/> Country of nationality _____ <input type="checkbox"/> Country of citizenship _____ <input type="checkbox"/> Country of source of wealth _____ <input type="checkbox"/> Residential address _____ <input type="checkbox"/> Permanent address (if different from residential address) _____ <input type="checkbox"/> Previous residential address for past 3 years (if applicable) _____		Signing group (if any): Signature: S.V.
5. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):		<input type="checkbox"/> Authorised signatory
NRIC/Passport no.:	Designation/Occupation:	<input type="checkbox"/> Partner
<p>If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.</p> <input type="checkbox"/> Former/Other name (Alias) _____ <input type="checkbox"/> Date of birth _____ <input type="checkbox"/> Country of nationality _____ <input type="checkbox"/> Country of citizenship _____ <input type="checkbox"/> Country of source of wealth _____ <input type="checkbox"/> Residential address _____ <input type="checkbox"/> Permanent address (if different from residential address) _____ <input type="checkbox"/> Previous residential address for past 3 years (if applicable) _____		Signing group (if any): Signature: S.V.
6. Full name as in NRIC/Passport (with title: Dr/Mr/Ms/Mdm):		<input type="checkbox"/> Authorised signatory
NRIC/Passport no.:	Designation/Occupation:	<input type="checkbox"/> Partner
<p>If the required information is contained in the document(s) of proof appended, please ✓ box. Otherwise, please provide details.</p> <input type="checkbox"/> Former/Other name (Alias) _____ <input type="checkbox"/> Date of birth _____ <input type="checkbox"/> Country of nationality _____ <input type="checkbox"/> Country of citizenship _____ <input type="checkbox"/> Country of source of wealth _____ <input type="checkbox"/> Residential address _____ <input type="checkbox"/> Permanent address (if different from residential address) _____ <input type="checkbox"/> Previous residential address for past 3 years (if applicable) _____		Signing group (if any): Signature: S.V.

Important: All signatures must be verified by an officer of an HSBC branch or an international bank.

