



## Clique Gold LLC

### Know Your Customer (Corporate)

#### Basic Details

<b>Legal Name</b>			
<b>Legal Structure</b>		<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership firm <input type="checkbox"/> Corporate <input type="checkbox"/> Trust <input type="checkbox"/> Others (please specify) _____	
<b>Nature of Business</b>			
<b>Date of Establishment</b>		<b>Place of Establishment</b>	
<b>Annual Turnover</b>		<b>Company Asset Size</b>	
<b>Trade License Number</b>		<b>Trade License Expiry Date</b>	
<b>Purpose of Transaction</b>			
<b>Mode of payment</b>			
<b>Source of Funds</b>			
<b>Source of Wealth</b>			
<b>Whether the business in a Free Zone?</b>		<b>If yes, then specify the name of the Free Zone</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Registered Place of Business</b>			
<b>Principal Place of Business</b> <i>(if separate from registered place of business)</i>			
<b>Other Countries in which business is undertaken from</b>			
<b>Email ID</b>			
<b>Website</b>			
<b>Business Phone Number</b>			
<b>Listed Company?</b>		<b>If yes, on which Stock Exchange?</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Scrip Code</b>			
<b>Other information</b>			
<b>Authorized Signatory</b>			
<b>Name</b> <i>(including alias/former names)</i>			
<b>Designation</b>			
<b>Gender</b>		<b>Birthdate</b>	
<b>Birthplace</b>		<b>Nationality</b>	
<b>Do you hold Dual Nationality?</b>		<b>If yes, specify other Nationalities</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No			



<b>Identification Proof</b>	<input type="checkbox"/> Driving License <span style="float: right;"><input type="checkbox"/> Passport</span> <input type="checkbox"/> Emirate ID <input type="checkbox"/> Others (please specify) _____		
<b>Identification Number</b> <i>(if holding multiple Passports, specify all Passport numbers)</i>			
<b>Contact Number</b>		<b>Email ID</b>	
<b>Address Proof</b>	<input type="checkbox"/> Utility Bill <span style="float: right;"><input type="checkbox"/> Property Purchase, Lease/Rental Agreement</span> <input type="checkbox"/> Municipal Tax Record <span style="float: right;"><input type="checkbox"/> Bank Statement</span> <input type="checkbox"/> Insurance Policy <input type="checkbox"/> Others (please specify) _____		
<b>UAE Resident?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Visa Type</b> <i>(Foreign National)</i>	
<b>Visa Number</b>		<b>Visa Expiry Date</b>	
<b>Politically Exposed Person?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Local Address</b>	Unit Number: Building Name: Street/Area: P.O. Box No.: <span style="float: right;">Pin Code:</span> Emirate: Country:		
<b>Permanent Address</b> <i>(If different from local address)</i>	Unit Number: Building Name: Street/Area: P.O. Box No.: <span style="float: right;">Pin Code:</span> Emirate: Country:		
<b>Other Information</b>			

Shareholders			
Name	Shareholding %	Passport No./Emirates ID/Trade License No.	Nationality/Country of Incorporation



Name	UBO by way of -	Ownership ___ %	Nationality

Board of Directors/Senior Management			
Name	Designation	Passport No./Emirates ID	Nationality

Bank Account Details (Source of Funds)			
Account Number			
Account Name			
Name of the Bank			
Bank Address			
City		State	
Country		Pin Code	
Sort Code		IBAN	
ABA		B/C/SWIFT	
Currency of Account			

**DECLARATION**

I/We hereby declare that the information given herein are true, correct and complete to the best of my knowledge and belief. In addition, the documents submitted along with this application are genuine.

I/We hereby undertake to promptly inform Clique Gold LLC of any changes in the information provided herein.

I/We agree & accept that Clique Gold LLC is not responsible or liable for any losses or activities performed based on this information provided by me/us and also due to not advising of any such changes.



Also, it is agreed that I/we will provide any additional information/documentation that may be required from time to time by Clique Gold LLC or its authorized agents in any connection with this form.

<b>Signature</b>	
<b>Name of the Customer/Supplier</b>	
<b>Date</b>	
<b>Place</b>	

**For Office Use only**

<b>Documentary proof collected and verified with source of document</b>			
Certificate of Incorporation		Memorandum of Association	
Article of Association		Trade License	
Certificate of Good Standing		Utility Bill	
Municipal Tax Record		Bank Statement	
Register of Shareholders/Directors/ UBO		Latest Audited Financials	
ID Proof of Authorised Signatory		Power of Attorney	
Group Organization Chart		Board Resolution for Authorised Signatory	
KYC Form for Partners/ UBO/Directors/Shareholders		Address Proof of Authorised Signatory	
Others ( <i>please specify</i> )		Others ( <i>please specify</i> )	
<b>Original Sighted/Obtained the certified copies and verified the same?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No

**Verified By (1<sup>st</sup>)**

<b>Name</b>	
<b>Signature</b>	



<b>Designation</b>		<b>Date</b>	
<b>Verified By (2<sup>nd</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	



<b>Clique Gold LLC</b>			
<b>Supply Chain and Compliance Declaration</b>			
<b>Origin of Precious Metals</b>			
<b>From whom do you source your precious metal products?</b>	<input type="checkbox"/> Refineries <input type="checkbox"/> Bankers <input type="checkbox"/> Precious Metals Dealers <input type="checkbox"/> Industrial <input type="checkbox"/> Others (please specify) _____		
<b>Name of your Precious Metal Suppliers</b>			
<b>Legal Structure of your suppliers</b>	<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership firm <input type="checkbox"/> Corporate <input type="checkbox"/> Trust <input type="checkbox"/> Others (please specify) _____		
<b>Country of purchase of precious metals</b>		<b>Country of origin of precious metal to be delivered to us?</b>	
<b>Is your supplier a regular supplier, having established legitimate ownership over the precious metals?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Do you ensure that your precious metal purchase complies with the country of origin's regulations?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Do you have license to import precious metals? (If yes, provide the copy of the same)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Do you have license to export precious metals? (If yes, provide the copy of the same)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>What is the form of precious metals you source?</b>	<input type="checkbox"/> Rudimentary Bars <input type="checkbox"/> Coins <input type="checkbox"/> Jewellery <input type="checkbox"/> Own Production Waste <input type="checkbox"/> Broken Jewellery <input type="checkbox"/> Collected Waste <input type="checkbox"/> Others (please specify) _____		
<b>Recycled precious metals (%)</b>			
<b>Are you having your smelting facility or refinery?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Are you having your manufacturing facility?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Responsible Gold Sourcing</b>			
<b>Do you have a policy in place for responsible supply chain of gold from conflict-affected and high-risk areas policy as set out in Annex II to the OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas? (If yes, provide the copy of the same)</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are you complying with any other Responsible Gold Sourcing Standards?</b>	<input type="checkbox"/> LBMA Responsible Gold Guidance <input type="checkbox"/> RJC Chain of Custody Standard <input type="checkbox"/> WGC Conflict Free Gold Standard <input type="checkbox"/> Conflict Free Smelter (CFS) Program		



	<input type="checkbox"/> Others (please specify) _____		
<b>Mode of Payment on your purchases (to your supplier)?</b>		<b>Mode of Payment on your sales (from your customer)?</b>	
<b>AML, Anti-Bribery Policy and other compliances</b>			
<b>Do you have adequate AML / CFT-related internal policies and procedures in place to mitigate the ML/FT risk?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Applicable AML Regulation</b>			
<b>Regulatory Authority for AML</b>			
<b>Have you appointed a duly qualified person as AML Compliance Officer?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Do you ensure regular AML training for your staff?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Do you have an anti-bribery policy in place? (If yes, provide a copy of the same)</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Do you have a procedure in place to seek details about customers/suppliers and their UBOs?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Do you seek documents from customers/suppliers for verification of identity and address?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No

**DECLARATION**

I/We hereby declare that the information given herein are true, correct and complete to the best of my knowledge and belief. In addition, the documents submitted along with this application are genuine.

I/We hereby declare that the precious metal supplied to Clique Gold LLC neither originates from any illegal sources nor has been transacted through or connected to criminal activities.

I/We hereby undertake to promptly inform Clique Gold LLC of any changes in the information provided herein.

I/We agree & accept that Clique Gold LLC is not responsible or liable for any losses or activities performed based on this information provided by me/us and also due to not advising of any such changes.

Also, it is agreed that I/we will provide any additional information/documentation that may be required from time to time by Clique Gold LLC or its authorized agents in any connection with this form.

<b>Signature</b>	
<b>Name of the Customer/Supplier</b>	
<b>Date</b>	
<b>Place</b>	

**For Office Use only**



<b>Documentary proof collected</b>			
<b>Import License</b>		<b>Export License</b>	
<b>Responsible Gold Supply Chain Policy</b>		<b>Anti-Bribery Policy</b>	
<b>Others (please specify)</b>		<b>Others (please specify)</b>	
<b>Verified By (1<sup>st</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	
<b>Verified By (2<sup>nd</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	





Clique Gold LLC			
Annexure 1 A: Individual Partner/Shareholder/Directors/UBO			
Basic Details			
<b>Name (including alias)</b>			
<b>Gender</b>		<b>Birthdate</b>	
<b>Birthplace</b>		<b>Nationality</b>	
<b>Do you hold Dual Nationality?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>If yes, specify other Nationalities</b>	
<b>Identification Proof</b>	<input type="checkbox"/> Driving License <input type="checkbox"/> Passport <input type="checkbox"/> Emirate ID <input type="checkbox"/> Others (please specify) _____		
<b>Identification Number</b> <i>(if holding multiple Passports, specify all Passport numbers)</i>			
<b>Contact Number</b>		<b>Occupation</b>	
<b>Email ID</b>			
<b>Address Proof</b>	<input type="checkbox"/> Utility Bill <input type="checkbox"/> Property Purchase, Lease/Rental Agreement <input type="checkbox"/> Municipal Tax Record <input type="checkbox"/> Bank Statement <input type="checkbox"/> Others (please specify) _____		
<b>UAE Resident?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Visa Type (Foreign National)</b>	
<b>Visa Number</b>		<b>Visa Expiry Date</b>	
<b>Source of Income/Funds</b>		<b>Annual Income</b>	
<b>Source of Wealth</b>			
<b>Politically Exposed Person?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Local Address</b>	Unit Number: Building Name: Street/Area: P.O. Box No.:    Pin Code: Emirate: Country:		
<b>Permanent Address</b>	Unit Number: Building Name: Street/Area: P.O. Box No.:    Pin Code: Emirate: Country:		
<b>Other information</b>			



Ultimate Beneficial Owners (UBO) as –			
Ultimately owns or controls whether directly or indirectly 25% or more of the shares or voting rights in the business		Exercises ultimate control over the management, or controls the corporate body	
Holds the right, directly or indirectly, to appoint or remove a majority of the board of directors		Controls the corporate body	
Has the right to exercise, or actually exercises, significant influence or control over the corporate body		Others ( <i>please specify</i> )	

DECLARATION	
<p>I/We hereby declare that the information given herein is true, correct, and complete to the best of my knowledge and belief. In addition, the documents submitted along with this application are genuine.</p> <p>I/We hereby undertake to promptly inform Clique Gold LLC of any changes in the information provided herein.</p> <p>I/We agree &amp; accept that Clique Gold LLC is not responsible or liable for any losses or activities performed based on this information provided by me/us and due to not advising of any such changes.</p> <p>Also, it is agreed that I/we will provide any additional information/documentation that may be required from time to time by Clique Gold LLC or its authorized agents in any connection with this form.</p>	
Signature	
Name of the Customer/Supplier	
Date	
Place	

For Office Use only			
Documentary proof collected and verified with source of document			
Emirates ID		Passport	
Driving License		Utility Bill	
Bank Statement		Municipal Tax Records	
Source of Wealth ( <i>Inheritance Certificate, Sale of Asset proof, Gift deed, Contract note for sale of an investment, Alimony, Business's bank statement in case of self-employed, etc.</i> )		Others ( <i>please specify</i> )	
Others ( <i>please specify</i> )		Others ( <i>please specify</i> )	



<b>Original Sighted/Obtained the certified copies and verified the same?</b>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Verified By (1<sup>st</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	
<b>Verified By (2<sup>nd</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	



**Clique Gold LLC**

**Annexure 1 AB: Corporate Partner/Shareholder**

**Basic Details**

<b>Legal Name</b>			
<b>Legal Structure</b>	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership firm	
	<input type="checkbox"/> Corporate	<input type="checkbox"/> Others (please specify) _____	
	<input type="checkbox"/> Trust		
<b>Nature of Business</b>			
<b>Date of Establishment</b>		<b>Place of Establishment</b>	
<b>Trade License Number</b>		<b>Trade License Expiry Date</b>	
<b>Registered Place of Business</b>			
<b>Principal Place of Business</b> <i>(if separate from registered place of business)</i>			
<b>Other Countries in which business is undertaken from</b>			
<b>Email ID</b>			
<b>Website</b>			
<b>Business Phone Number</b>			
<b>Listed Company?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>If yes, on which Stock Exchange?</b>	
<b>Scrip Code</b>			
<b>Other information</b>			

**Shareholders**

<b>Name</b>	<b>Shareholding %</b>	<b>Passport No./Emirates ID/Trade License No.</b>	<b>Nationality/Country of Incorporation</b>

**Ultimate Beneficial Owners (UBO) – Only Individuals**

<b>Name</b>	<b>UBO by way of -</b>	<b>Ownership ___ %</b>	<b>Nationality</b>



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Board of Directors/Senior Management			
Name	Designation	Passport No./Emirates ID	Nationality

Declaration	
<p>I/We hereby declare that the information given herein is true, correct, and complete to the best of my knowledge and belief. In addition, the documents submitted along with this application are genuine.</p> <p>I/We hereby undertake to promptly inform Clique Gold LLC of any changes in the information provided herein.</p> <p>I/We agree and accept that Clique Gold LLC is not responsible or liable for any losses or activities performed based on this information provided by me/us and due to not advising of any such changes.</p> <p>Also, it is agreed that I/we will provide any additional information/documentation that may be required from time to time by Clique Gold LLC or its authorized agents in any connection with this form.</p>	
<b>Signature</b>	
<b>Name of the Customer/Supplier</b>	
<b>Date</b>	
<b>Place</b>	

For Office Use only			
Documentary proof collected and verified with source of document			
Certificate of Incorporation		Memorandum of Association	
Article of Association		Trade License	
Certificate of Good Standing		Utility Bill	
Municipal Tax Records		Bank Statement	



Register of Shareholders/Directors/ UBO		Latest Audited Financials	
Group Organization Chart		Power of Attorney	
Others ( <i>please specify</i> )		Others ( <i>please specify</i> )	
Original Sighted/Obtained the certified copies and verified the same?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Verified By (1<sup>st</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	
<b>Verified By (2<sup>nd</sup>)</b>			
<b>Name</b>			
<b>Signature</b>			
<b>Designation</b>		<b>Date</b>	