



Account Data – Business Partners

pdf-Navigation: use "Tab" to proceed or click on box to enter data

COMPANY DETAILS	
Name	
Registered Address	
Other Address (e.g. for manufacturing site)	
Business Address	
Phone Number	
Date of Incorporation	
Country of Incorporation	
Business Registration number	
Tax Identification number	
VAT number	
Website	

BANKING DETAILS	
Account Holder	
Credit Institute	
IBAN	
BIC	

MANAGEMENT	
<p>Is the company complying with any of the following bcfa g3</p> <p><input type="checkbox"/> ISO 9001 Quality Management</p> <p>ISO 14001 Environmental Management</p> <p><input type="checkbox"/> ISO 50001 Energy Management</p> <p>Others, please specify:</p>	<p><i>Additional comments:</i></p>
<p>Does the company publish a due diligence or sustainability report?</p> <p><input type="checkbox"/> Yes <i>Please provide a copy</i></p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> N/A</p>	

MANAGEMENT STRUCTURE				
	Names	Titles	Nationality(ies)	Date of Birth
Board of Directors				
Management				

FINANCIAL INFORMATION			
	Currency	Last Reporting Period	Previous Year
Total Shareholder's Equity			
Turnover			

Please provide copy of latest annual report, if available

HUMAN RESOURCES	
Number of Employees within the Company	
Number of Employees within the Group	

BENEFICIAL OWNERS				
SHAREHOLDER(S) MORE THAN 10% - LEGAL ENTITIES				
Percentage Holding (%)	Name	Address	Country of Incorporation/	Date of Incorporation/

ULTIMATE BENEFICIAL OWNER					
SHAREHOLDER(S) MORE THAN 10% - INDIVIDUAL ONLY					
Percentage Holding (%)	Name	Address	Nationality(ies)	Date of Birth	PEP Status (YES/NO)

Authorised Signatories – Please provide ID copies		
First Name:	Last Name:	Signature Specimen:
Position:		
First Name:	Last Name:	Signature Specimen:
Position:		

BUSINESS ACTIVITY													
Type of your business	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Bank</td> <td style="width: 50%;">Refinery</td> </tr> <tr> <td>Other Financial Intermediary</td> <td>Wholesaler</td> </tr> <tr> <td>Precious Metals Trader</td> <td>Scrap Dealer / Pawn Shop</td> </tr> <tr> <td>Industrial Producer</td> <td>Coins Dealer</td> </tr> <tr> <td>Jewellery Producer</td> <td>Others, <i>please specify</i></td> </tr> <tr> <td>Mint</td> <td></td> </tr> </table>	Bank	Refinery	Other Financial Intermediary	Wholesaler	Precious Metals Trader	Scrap Dealer / Pawn Shop	Industrial Producer	Coins Dealer	Jewellery Producer	Others, <i>please specify</i>	Mint	
Bank	Refinery												
Other Financial Intermediary	Wholesaler												
Precious Metals Trader	Scrap Dealer / Pawn Shop												
Industrial Producer	Coins Dealer												
Jewellery Producer	Others, <i>please specify</i>												
Mint													
Core business activity <i>Please describe</i>													
Product Portfolio <i>Please describe</i>													
Main markets (countries)													
Does the company hold a specific licence to conduct its business(es)?	<input type="checkbox"/> Yes <i>Please provide a copy</i> Date of issue: Expiry date: <input type="checkbox"/> No <input type="checkbox"/> N/A												
Main interest in Agosi's portfolio													
Type of required products / services													

ORIGIN OF MATERIAL DELIVERED TO AGOSI (if applicable)			
Type of business you source your precious metals bearing materials from:			
Bank	Wholesaler		
Other Financial Intermediary	Scrap Dealer/Pawn Shop		
Precious Metals Trader	Coins Dealer		
Industrial Producer	Individuals		
Jewellery Producer	Others, <i>please specify</i>		
Mint			
Refinery			
List all country(ies) of origin of the material you deliver to Agosi			
What are the types / forms of material to be sent to Agosi? *)			
<input type="checkbox"/> production waste (not melted)			<input type="checkbox"/> Others, <i>please specify</i>
<input type="checkbox"/> collected waste (not melted)			
<input type="checkbox"/> investment bars (marked)			
<input type="checkbox"/> melted bars (not marked)			
Does the Company have refining facilities?			
Location (if different from registered address):	YES	NO	N/A
Does the Company have any melting facilities? <i>If yes, please provide photographs</i>			
Location (if different from registered address):			

*) If refining material is delivered, pls note comments a) - f) on page 8.

COMPLIANCE	
ANTI MONEY LAUNDERING (AML) – COMBATING FINANCIAL TERRORISM (CFT)	
Is your institution subject to Anti-Money Laundering / Combating Financial Terrorism Law or Regulation	<input type="checkbox"/> Yes - <i>please complete Annex 1/Wolfsberg questionnaire</i> <input type="checkbox"/> No
Name of the AML-CFT Law/Regulation	
Name of the Regulator	
Does the company accept any cash-payments?	<input type="checkbox"/> Yes - <i>to what extent?</i> <input type="checkbox"/> No
OTHER COMPLIANCE POLICIES	
Does your Company have an anti-bribery policy in place?	<input type="checkbox"/> Yes - <i>Please provide a copy</i> <input type="checkbox"/> No
Does your Company have a Human Rights policy in place?	<input type="checkbox"/> Yes - <i>Please provide a copy</i> <input type="checkbox"/> No
Does your Company have other due diligence policies in place?	<input type="checkbox"/> Yes - <i>Please provide a copy</i> <input type="checkbox"/> No
INTERNATIONALLY RECOGNIZED STANDARDS	
Is the company complying with any of the following industry standards? <input type="checkbox"/> LBMA Responsible Gold Refining Guidance <input type="checkbox"/> LPPM Responsible Sourcing Guidance <input type="checkbox"/> RJC Code of Practice <input type="checkbox"/> RJC Chain of Custody <input type="checkbox"/> EU Conflict Minerals Regulation or equivalent <input type="checkbox"/> Responsible Minerals Initiative <input type="checkbox"/> WGC World Gold Council Conflict Free Gold Standard <input type="checkbox"/> Fairtrade <i>Others, please specify:</i>	<i>Additional comments:</i>

Authorised Signatories – Please provide ID copies		
First Name:	Last Name:	Signature Specimen:
Position:	Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual	
First Name:	Last Name:	Signature Specimen:
Position:	Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual	
First Name:	Last Name:	Signature Specimen:
Position:	Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual	
First Name:	Last Name:	Signature Specimen:
Position:	Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual	

Comments / Additional information (please indicate which question the information is referring to):

SIGNATURE

I hereby declare that the information given above is true and accurate as of the date of writing.

I undertake to automatically inform **Agosi AG** of any changes of refining material.

	Authorised Signatory	Authorised Signatory
Signature:		
Print Name:		
Title:		
Company Name:		
Date and location:		

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Please note: The person signing this form confirms with his/her signature that:

- a) he/she has reached the age of majority and is of unlimited legal capacity
- b) the precious metal/scrap material or the non-precious metal was lawfully acquired
- c) there is no retention of title in favour of a third party
- d) the enclosed terms and conditions are acknowledged and accepted, see: [General Terms of Business](#) › Agosi
- e) the goods are from a conflict-free source.

Please refer to our Supply Chain Due Diligence Policy on Precious Metals, available at: [Responsibility](#) › Agosi

f) on the basis of this business relationship, all regulations re. applicable tax legislation will be observed