



THE ARK

PRECIOUS METAL TRADING COMPANY INC.

DUBAI, UAE
www.arkpmtdubai.com

CUSTOMER & SUPPLIER INFORMATION FORM

THE ARK PRECIOUS METAL TRADING COMPLIANCE DUE DILIGENCE



License No:1004428



THE ARK

PRECIOUS METAL TRADING COMPANY INC.

DUBAI, UAE

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INTENDED BUSINESS

❖ Please provide us with the brief description of your intended business with The Ark Precious Metal Trading Company Inc.

1. Refining (services)

a) Gold

b) Silver

c) Others

2. Bullion Trading

3. Minting Services

4. Description :



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KYC REQUIREMENTS

❖ Counter Party (Direct Client/Supplier) to The Ark PMT Company Inc.

1. Trade license copy / Business registration
2. Proof of ownership such as Memorandum of Association (MOA), share certificate or mentioned on the license or online business registry extract.
3. Valid ID proof. Such as Passport, Emirates ID
4. VAT Certificate (Tax No./ID/Certificate etc.)
5. KYC Form with AML-CFT Declaration
6. Contact Details: Phone Number, Email
7. Address proof of the company such as utility bill or tenancy contract
8. Address proof of the owner/partners such as utility bill or tenancy contract
9. Source of funds:
 - owner/partner(s) to be mentioned in the individual's information sheet.
 - Initial funding for the company registration and operating funds
10. AML Policy and procedures copy (if available)

❖ Supplier Company of the Counter Party

1. Business Registration certificate
2. Export License
3. Mining License/Permit
4. Valid Photo ID. Such as Passport, Local National ID, Driving License etc.
5. Sourcing practice.
6. AML-CFT Declaration
7. Chain of custody documents of the supply-chain.



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SECTION- 1 THE COMPANY DETAILS

COMPANY REGISTRATION

Company Registered Name

Trade/ Business Name
(If different than the registered)

License/Registration Number

License/Registration Expiry Tax

Registration Number Country of

Incorporation Incorporation

Date

Country of Incorporation

Registered Activity

<input type="checkbox"/>	Precious Metals Trader/Dealer	<input type="checkbox"/>	Refinery
<input type="checkbox"/>	Mining Company	<input type="checkbox"/>	Jeweller
<input type="checkbox"/>	Others (Please Specify): <input type="text"/>		

Please describe your
Core business activity

Business Activity Experience
(Total number of years)

Registered Address

Business/Mailing Address
(If different than the registered)

Telephone Number

Email Address

Website



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SECTION-2 OWNERSHIP

OWNERSHIP DETAILS

Please provide the list of shareholders, which own 5% or more of your Company. These shareholders may be individuals or other companies.

Holding Percentage(%)	Shareholder Type	Name of the Shareholder	Country Incorporation/Nationality	Date Incorporation / Birthday
	Individual Corporate			
	Individual Corporate			
	Individual Corporate			
	Individual Corporate			
	Individual Corporate			

Kindly attach the relevant confirming the shareholder structure, such as memorandum or articles of association, shareholder certificates, etc.

ULTIMATE BENEFICIAL OWNERS OF YOUR COMPANY

Ultimate Beneficial Owners must be individuals. Please provide written independent evidence confirming ownership

Holding Percentage(%)	Name of the Shareholder	Photo ID Number	Nationality	Date Incorporation / Birthday

SECTION-3 AUTHORISED PERSONS

DIRECTORS / AUTHORISED SIGNATORIES

Please List all individuals who are fully authorized to sign and transact for and on behalf of the Company.

Name of the Shareholder	Photo ID Number	Nationality	Date Incorporation / Birthday



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SECTION-4 INDIVIDUAL DETAILS

INDIVIDUAL INFORMATION SHEET

Please provide details of the ultimate beneficial owners (individuals):

Full Name

Nationality

Are you a PEP:

Birth Date

Passport Number

(or other Government Issued ID)

Expiry date of the ID

(Minimum Validity 3 months)

Emirates ID

(if applicable)

Residential Address

Sources of Income/Funds

Telephone Number

Email Address

Full Name

Nationality

Are you a PEP:

Yes / No

Birth Date

Passport Number

(or other Government Issued ID)

Expiry date of the ID

(Minimum Validity 3 months)

DD / MM / YYYY

Emirates ID

(if applicable)

Residential Address

Sources of Income/Funds

Telephone Number

Email Address



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**SECTION-
4
INDIVIDUAL
DETAILS**

INDIVIDUAL INFORMATION SHEET

Please provide details of the ultimate beneficial owners (individuals):

Full Name		
Nationality		Are you a PEP: <input type="checkbox"/>
Birth Date		
Passport Number (or other Government Issued ID)		
Expiry date of the ID (Minimum Validity 3 months)		
Emirates ID (if applicable)		
Residential Address		
Sources of Income/Funds		
Telephone Number		
Email Address		

Full Name		
Nationality		Are you a PEP: <input type="checkbox"/> Yes / No
Birth Date	DD / MM / YYYY	
Passport Number (or other Government Issued ID)		
Expiry date of the ID (Minimum Validity 3 months)	DD / MM / YYYY	
Emirates ID (if applicable)		
Residential Address		
Sources of Income/Funds		
Telephone Number		
Email Address		



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SECTION-4 INDIVIDUAL DETAILS

INDIVIDUAL INFORMATION SHEET

Please provide details of the ultimate beneficial owners (individuals):

Full Name

Nationality

Are you a PEP:

Yes / No

Birth Date

DD / MM / YYYY

Passport Number
(or other Government Issued ID)

Expiry date of the ID
(Minimum Validity 3 months)

DD / MM / YYYY

Emirates ID
(if applicable)

Residential Address

Sources of Income/Funds

Telephone Number

Email Address

Full Name

Nationality

Are you a PEP:

Yes / No

Birth Date

DD / MM / YYYY

Passport Number
(or other Government Issued ID)

Expiry date of the ID
(Minimum Validity 3 months)

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Residential Address

Sources of Income/Funds

Telephone Number

Email Address



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**SECTION-5
BANKING
INFORMATION**

BANK ACCOUNT

Payments will be made only to the bank details provided in this form or its supplements:

Bank Name	
Country Location/Address	
Beneficiary Name	
Currency	
Account Number	
Account IBAN	
Swift Code	

Correspondent bank details in case of international transfers

Correspondent Bank Name	
Currency	
Account Number	
Account IBAN	
Swift Code	

Bank Name	
Country Location/Address	
Beneficiary Name	
Currency	
Account Number	
Account IBAN	
Swift Code	

Correspondent bank details in case of international transfers

Correspondent Bank Name	
Currency	
Account Number	
Account IBAN	
Swift Code	



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SECTION-6 TRADE REFERENCES

SUPPLIER'S INFORMATION

Please provide information with reference to your precious metal transactions

Name of the Supplier	Country of Origin	Commodity Type	Purity Range	Quantity Per Shipment	Mode Of Transport

Please note: The Compliance Team may request further documents based on the above information and the documents provided in it's support.

SECTION-7 DECLARATIONS

Declarations & Commitments

By signing this form, we (the Company, its directors, and Ultimate Beneficial Owners) declare that:

- We are aware of
 - the latest OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict- Affected and High-Risk Areas,
 - the latest LBMA Responsible Gold Guidance, and
 - the latest DMCC Rules for Risk Based Due Diligence in the Gold and Precious Metals Supply Chain
- We have read and understood **The Ark PMT Company** Policy and commit to maintain similar standards. We are also aware that **The Ark** team is available at any time for summarized or in-depth discussions regarding their policies, the guidance mentioned above or any other compliance related topics.
- We undertake that all the information provided to **The Ark PMT Company** in this form or future documents is true to the best of our knowledge, and that we will promptly notify **The Ark** Policy of any mistakes or changes to the information provided.
- We commit to dealing only with legitimate gold which is free from being directly or indirectly linked to criminal or unethical activity such as (but not limited to) money laundering, war, terrorism, human rights abuse, fraud, or corruption.

Authorized Signatures

Company Stamp

Authorised Signatory Name

Title/ Designation

Passport/Emirates ID number

Note: All completed forms should be sent to compliance@arkpmtdubai.com