

# OSLO INTERNATIONAL TRADING LLC

## Account Opening Form – Corporate

SIG/AOF/2024/Rev-001A

|                |  |
|----------------|--|
| ACCOUNT NAME   |  |
| ACCOUNT NUMBER |  |



### CHECKLIST OF THE DOCUMENTS REQUIRED:

|                          |                                                                                     |
|--------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> | Copy of Trade License                                                               |
| <input type="checkbox"/> | Copy of Certificate of Incorporation                                                |
| <input type="checkbox"/> | Copy of Memorandum of Association                                                   |
| <input type="checkbox"/> | Copy of Articles of Association (if available)                                      |
| <input type="checkbox"/> | Proof of Company Office Address (Copy of Tenancy Contract / Utility bill)           |
| <input type="checkbox"/> | Proof of Residency – Partners/Shareholder (Copy of Tenancy Contract / Utility bill) |
| <input type="checkbox"/> | Copy of Shareholder Passport and Visa page                                          |
| <input type="checkbox"/> | Copy of TAX Registration Number                                                     |
| <input type="checkbox"/> | Copy of Financial Statements                                                        |

**Important Notice:** Customers who wish to open a Business Account with us must submit the following documents. Failure to send the minimum document required will cause delay or ultimately rejection of the application

## ACCOUNT OPENING FORM

### 1. COMPANY DETAILS

|                                  |                                                             |  |
|----------------------------------|-------------------------------------------------------------|--|
| a. Company Name                  |                                                             |  |
| b. Registered Address            |                                                             |  |
| c. Business Address              |                                                             |  |
| d. Contact Details:              | Contact Person Name                                         |  |
|                                  | Contact Person Designation                                  |  |
|                                  | Landline Number                                             |  |
|                                  | Mobile Number                                               |  |
|                                  | Fax Number                                                  |  |
|                                  | Email                                                       |  |
| e. Date of Incorporation         |                                                             |  |
| f. Country of Incorporation      |                                                             |  |
| g. Business License Number       |                                                             |  |
| h. Tax Identification number     |                                                             |  |
| i. Website                       |                                                             |  |
| j. External Financial Auditors   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |  |
| k. No. of Subsidiaries (if any): |                                                             |  |

### 2. BUSINESS ACTIVITY

|                                                                                      |                                                             |  |
|--------------------------------------------------------------------------------------|-------------------------------------------------------------|--|
| a. Type of Business<br>(Please Tick the relevant)                                    | Precious Metal Trade                                        |  |
|                                                                                      | Wholesaler / Manufacturer                                   |  |
|                                                                                      | Investment Company                                          |  |
|                                                                                      | Retailer (Jewellery)                                        |  |
|                                                                                      | Others (Please specify):                                    |  |
| b. Description of core business activity                                             |                                                             |  |
| c. No of years in the business                                                       |                                                             |  |
| d. Number of Employees                                                               |                                                             |  |
| e. Does your establishment have Politically Exposed Persons (PEPs) in the Management | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |  |
|                                                                                      | If yes, please provide Details:                             |  |
| f. Please specify method of payment (%)                                              | Cash:                                                       |  |
|                                                                                      | Bank:                                                       |  |
|                                                                                      | Cheque:                                                     |  |

### 3. LIST OF SUPPLIERS AND CUSTOMER DETAILS

| SL No | Supplier and Customers Name | Country of origin | Website Details |
|-------|-----------------------------|-------------------|-----------------|
| 1     |                             |                   |                 |
| 2     |                             |                   |                 |
| 3     |                             |                   |                 |
| 4     |                             |                   |                 |
| 5     |                             |                   |                 |

### 4. ORIGIN OF PHYSICAL PRECIOUS METALS (IF DEPOSITING METAL)

|                                                                     |  |
|---------------------------------------------------------------------|--|
| a. Profile of your precious metal's suppliers(Individual / Company) |  |
| b. Country of origin of the precious metals delivered               |  |

### 5. DESCRIPTION OF PRECIOUS MATERIAL (IF DEPOSITING METAL)

|                                                                                    |                                         |  |
|------------------------------------------------------------------------------------|-----------------------------------------|--|
| 3. DESCRIPTION OF PRECIOUS MATERIAL (H DEPOSITING METAL)                           |                                         |  |
| Type of Material to be Traded                                                      |                                         |  |
| Monthly Estimated Turnover                                                         |                                         |  |
| Estimated Precious Metal Content (%)                                               | Gold                                    |  |
|                                                                                    | Silver                                  |  |
|                                                                                    | Other:                                  |  |
| What are the types, forms and percentage of precious metals sourced by the Company | Recycled precious metals (% )           |  |
|                                                                                    | LBMA GD Bullion                         |  |
|                                                                                    | Non LBMA Good Delivery Bullion          |  |
|                                                                                    | Jewellery                               |  |
|                                                                                    | Broken Jewellery                        |  |
|                                                                                    | Coins                                   |  |
|                                                                                    | Others Please specify:                  |  |
|                                                                                    | Primary material: mined precious metals |  |

### 6. BANKING INFORMATION

|                                          |  |
|------------------------------------------|--|
| Bank Name / Branch                       |  |
| Bank address                             |  |
| Bank SWIFT Code                          |  |
| Bank account number                      |  |
| Bank IBAN number                         |  |
| Account Name ( <i>as per statement</i> ) |  |

## 7. SOURCE OF FUNDS DECLARATION

|                           |                                                                                                                                                                                                               |
|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Source of Income          | <input type="checkbox"/> Investment Income<br><input type="checkbox"/> Business Earning<br><input type="checkbox"/> Salary<br><input type="checkbox"/> Property Income<br><input type="checkbox"/> Any other: |
| Estimated Annual Income   | <input type="checkbox"/> AED 1-25 Million<br><input type="checkbox"/> AED 25-50 million<br><input type="checkbox"/> AED 50-100 Million<br><input type="checkbox"/> AED100 Million and Above                   |
| Estimated Total Net worth | <input type="checkbox"/> AED 1-25 Million<br><input type="checkbox"/> AED 25-50 million<br><input type="checkbox"/> AED 50-100 Million<br><input type="checkbox"/> AED100 Million and Above                   |

### Declaration:

I/We understand that I/we am/are required to declare the source of funds that I/we will be using for the purpose as stated in this application as a part of **Oslo International** requirement to open an account. I/We understand the requirements of the Federal Decree-Law No. (20) of 2018 On Anti-Money Laundering and Combatting the Financing of Terrorism and Financing of Illegal Organizations and the Cabinet Decision No. (10) of 2019 Concerning the Implementing Regulation of Decree Law no. (20) of 2018 on Anti-Money Laundering and Combating the Financing of Terrorism and Illegal Organizations and do hereby undertake that the source of funds/metals are acquired from legitimate sources and evidences of such is available if needed or as requested.

I/We do hereby undertake that the funds/metals do not originate from any sanctioned country/entity/person/s from the United Nations and other relevant sanction programs. We are authorizing to Compliance Department of **Oslo International** can contact our dedicated compliance person at any time to obtain documents for periodic assessment, additional documents requirement, AML Questionnaire etc.

## 8. FINANCIAL INFORMATION

| Particulars                   | Currency | Last Reporting Period | Previous Year |
|-------------------------------|----------|-----------------------|---------------|
| a. Share Capital              |          |                       |               |
| b. Total Shareholder's Equity |          |                       |               |
| c. Total Balance Sheet        |          |                       |               |
| d. Sales                      |          |                       |               |
| e. Net Income                 |          |                       |               |

## 9. MANAGEMENT STRUCTURE

### Top Management

| Name | Nationality | Date of Birth | Passport Number | Passport Expiry | UAE Residency |
|------|-------------|---------------|-----------------|-----------------|---------------|
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |

### Ultimate Beneficial Owners UBOs (owns more than 25% of the company's shares or more)

| Name | Nationality | Date of Birth | Passport Number | Passport Expiry | UAE Residency |
|------|-------------|---------------|-----------------|-----------------|---------------|
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |
|      |             |               |                 |                 |               |

#### Declaration:

I/We confirm that I am/we are not a Politically Exposed Person

I/We hereby authorise investigation of my/our identity and agree to an enhanced ongoing monitoring should I/we be deemed to be politically exposed.

## 10. Shareholders/Ultimate Beneficial Owner Details

|                                                                                                                                                                                                                                                                                                                                |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Are shareholders/ultimate beneficiaries a PEP or Associated to a PEP                                                                                                                                                                                                                                                           |  |
| Are the company or ultimate beneficiaries listed as sanctioned entity by any country or UNSCR                                                                                                                                                                                                                                  |  |
| Any previous or existing business dealing (by company or ultimate beneficiaries) with individuals/entities in the countries listed under sanctions or embargo list of UAE, UNSCR & USA's Office of Foreign Asset Control, Department of the Treasury ("OFAC"), or otherwise subject to any U.S. sanctions administered by OFAC |  |

## 11. Sanction Declaration

|                                                                                                                                                                                            |                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| Do you deal with any sanctioned country?<br>If yes, please mention which                                                                                                                   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Has your company implemented<br>UAE Cabinet issued Resolution (74) of 2020                                                                                                                 | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Has your company Subscribed to the United Nation<br>Consolidated List and UAE Terrorist list<br>from the Executive Office website <a href="http://www.uaecic.gov.ae">www.uaecic.gov.ae</a> | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| Does your company deal with individuals, entities, groups<br>or undertakings, which fall in "UAE Terrorist List" and<br>"UN Nation Consolidated List"                                      | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |

## KYC QUESTIONER

### A. ANTI MONEY LANDERING (AML) – COMBATING FINANCIAL TERRORISM (CFT)

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                     |      |  |             |  |        |  |          |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--|-------------|--|--------|--|----------|--|
| Does the company have a person responsible for AML – CFT matters (Due diligence, AML policies and training)?<br>If yes, please provide the requested details                                                                                                                                                       | <input type="checkbox"/> YES<br><input type="checkbox"/> NO<br><table border="1"> <tr> <td>Name</td> <td></td> </tr> <tr> <td>Designation</td> <td></td> </tr> <tr> <td>Number</td> <td></td> </tr> <tr> <td>Email ID</td> <td></td> </tr> </table> | Name |  | Designation |  | Number |  | Email ID |  |
| Name                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                     |      |  |             |  |        |  |          |  |
| Designation                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                     |      |  |             |  |        |  |          |  |
| Number                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                     |      |  |             |  |        |  |          |  |
| Email ID                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                     |      |  |             |  |        |  |          |  |
| Does your company implement policies and procedures applicable to all branches and subsidiaries related to local and international covering Cabinet Decision No. (10) of 2019 Anti -Money Laundering and Combat Terrorist Financing?                                                                               | <input type="checkbox"/> YES<br><input type="checkbox"/> NO<br>(If yes, please attach the copy)                                                                                                                                                     |      |  |             |  |        |  |          |  |
| Does the company conduct an AML-CFT training for Employee's?                                                                                                                                                                                                                                                       | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                                                                                                                                                                         |      |  |             |  |        |  |          |  |
| Does the company delegate to third parties some of the compliance functions to be carried out?<br>If yes, what function and which company do you delegate?                                                                                                                                                         | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                                                                                                                                                                         |      |  |             |  |        |  |          |  |
| Did your establishment sign up to the GOAML system of the FIU?<br>1) Update all Cash and Wire Transaction above AED55,000/-<br>2) Report Suspicious activity /Transaction                                                                                                                                          | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                                                                                                                                                                         |      |  |             |  |        |  |          |  |
| Please provide GO AML Proof of Registration                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                     |      |  |             |  |        |  |          |  |
| Does your Company have checks in place to identify if its customers / clients and their beneficial owners are 'Politically Exposed Persons' (PEPs)?                                                                                                                                                                | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                                                                                                                                                                         |      |  |             |  |        |  |          |  |
| Does your company conduct risk assessment considering the results of the National Risk Assessment and Geographic risk?                                                                                                                                                                                             | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                                                                                                                                                                         |      |  |             |  |        |  |          |  |
| Does your establishment have procedures in place to check if its customers / clients and any other parties (such as beneficial owners) are subjects of targeted financial sanctions by the United Nations Security Council, the UAE, or any other relevant body as per UAE Cabinet issued Resolution (74) of 2020? | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                                                                                                                                                                         |      |  |             |  |        |  |          |  |

### B. ANTI- BRIBERY POLICY

|                                                                                                                                                    |                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| a. Does your Company have any anti bribery policy in place?                                                                                        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| b. Has the company, or the Senior Management ever been charged anywhere in the world for violation of applicable anti-bribery laws or regulations? | <input type="checkbox"/> YES<br><input type="checkbox"/> NO |

### C. RESPONSIBLE PRECIOUS METAL SUPPLY CHAIN POLICY

|                                                                                                                                                                                                                                                                                  |                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Does your company establish a responsible supply chain of metal from conflict-affected and high-risk areas policy which is consistent with the standards of the OECD Due Diligence guidance for responsible Supply chain of Minerals from Conflict-Affected and High-Risk Areas? | <input type="checkbox"/> YES<br><input type="checkbox"/> NO<br>(If yes, please attach the copy) |
| Do you implement systems for the identification of your suppliers and retain related documents in accordance with the DMCC rules for RBD-GPM/ OECD Guidelines?                                                                                                                   | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                     |
| Do you implement policies and procedure designed to meet and implement the DMCC rules for RBD-GPM/ OECD Guidelines?                                                                                                                                                              | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                     |
| Do you implement a formal responsible supply chain policy that identifies and mitigates related risk in accordance to DMCC in alignment with the OECD Due Diligence for responsible supply chain of minerals from conflicted and high- risk areas?                               | <input type="checkbox"/> YES<br><input type="checkbox"/> NO<br>(If yes, please attach the copy) |
| Are you active in primary Mine supply (e.g Dore Bars)?                                                                                                                                                                                                                           | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                     |
| Are you active in secondary supply (e.g Scrap Jewellery)?                                                                                                                                                                                                                        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                     |
| Do you currently / potential source metal from conflicted and high-risk area                                                                                                                                                                                                     | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                     |
| Does the risk assessment consider delivery channels risk?                                                                                                                                                                                                                        | <input type="checkbox"/> YES<br><input type="checkbox"/> NO                                     |

### DECLARATION

I/ We hereby declare that the information given above is true and accurate as of the date of writing. I /we undertake to automatically inform **Oslo International** of any material changes.

| Details                | Authorized signatory | Authorized signatory |
|------------------------|----------------------|----------------------|
| Signature:             |                      |                      |
| Print Name:            |                      |                      |
| Company Name and Stamp |                      |                      |
| Date and location:     |                      |                      |

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| Details                   | Approved | Rejected |
|---------------------------|----------|----------|
| Signature:                |          |          |
| Print Name:               |          |          |
| Designation:              |          |          |
| Date and location:        |          |          |
| Feedback of the Decision: |          |          |

## DECLARATION OF SOURCE OF FUNDS

I/ We, the Authorized Signatory of \_\_\_\_\_ and the undersigned hereby confirm that the accumulated wealth is derived from legitimate sources, which are not linked and/or derived from criminal origin, of whatsoever nature, and in particular do not constitute the proceeds of money laundering or terrorist financing. The origins of my accumulated wealth are provided below in this document.

I/ We, declare that the source of funds that I/we possess are from (Tick the appropriate)

|                 |                            |
|-----------------|----------------------------|
| Salary          | Inheritance                |
| Business Income | Investment Income          |
| Dividend        | Profits from property sale |
| Interest        | Rental Income              |
| Others:         |                            |

I/We understand that I/we am/are required to declare the source of funds that I/we will be using for the purpose as stated in this application as a part of **Oslo International Trading LLC** requirement to open an account. I/We understand the requirements of the Federal Decree-Law No. (20) of 2018 On Anti-Money Laundering and Combatting the Financing of Terrorism and Financing of Illegal Organizations and the Cabinet Decision No. (10) of 2019 Concerning the Implementing Regulation of Decree Law no. (20) of 2018 on Anti-Money Laundering and Combating the Financing of Terrorism and Illegal Organizations and do hereby undertake that the source of funds/metals are acquired from legitimate sources.

I / We declare that information provided in this form is true and complete. I agree to provide the Oslo International Trading LLC with any further information or supporting documentary evidence in respect of the sources of wealth upon request.

Full name of the Authorized Signatory: .....

Signature of the Authorized Signatory: .....

**Note: The Details of the supporting documents that we would require based on your selection are provided in Annexure 1.**

## Annexure 1

| SL No | Type of Income                                                                                                                                                                                                                                                       | Details Required (Any Two)                                                                                                               |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| 1     | Salary                                                                                                                                                                                                                                                               | Pay Slips<br>Salary Certificate<br>Bank Statement                                                                                        |
| 2     | Business Income                                                                                                                                                                                                                                                      | Audited Financials<br>Trade License Copy<br>Chamber of Commerce Registration<br>Tax Registration<br>Nature of Business<br>Bank Statement |
| 3     | Dividend                                                                                                                                                                                                                                                             | Dividend Letter<br>Bank Statement<br>Proof of share purchase                                                                             |
| 4     | Interest                                                                                                                                                                                                                                                             | Investment Proof<br>Deposit Proof<br>Bank Statement                                                                                      |
| 5     | Inheritance                                                                                                                                                                                                                                                          | Solicitor \ lawyer's signed letter<br>Benefactors source of income<br>Proof of relationship                                              |
| 6     | Investment Income                                                                                                                                                                                                                                                    | Share certificate<br>Contract note/statement<br>Bank statement<br>Proof of Liquidation                                                   |
| 7     | Profits from property sale                                                                                                                                                                                                                                           | Title deed from the land registry<br>Sale Agreement copy<br>Valuation Certificate<br>Bank Statement                                      |
| 8     | Rental Income                                                                                                                                                                                                                                                        | Title deed Copy<br>Ejari Copy<br>Lease agreement<br>Rental receipts<br>Declaration from real estate management entity                    |
| 9     | Other Source of Income <ul style="list-style-type: none"> <li>• Pension</li> <li>• Family Support</li> <li>• Compensation payment</li> <li>• Gifts</li> <li>• Divorce Settlement</li> <li>• Lottery Winning Settlement</li> <li>• Sale of Family Antiques</li> </ul> | Based on the Other source of Income the required supporting documents would be informed accordingly.                                     |

**POLITICALLY EXPOSED PERSON (PEP) DECLARATION****Account Holder Name:**

I/we would like to open a trading account with **Oslo International Trading LLC**. I confirm having read the definition of PEP as below and confirm my status by ticking the appropriate item as per point 2 and also by responding to your questions.

**1. Definition of PEP**

Defined are natural persons who have been entrusted with prominent functions either in the United Arab Emirates, in a foreign country or in an international organization such as:

- (1) Head of State or Government; Ministers, Second Ministers or Ministers of State, Members of Parliament, or Nominated Members of Parliament, Director / General or Senior Politician or High-Ranking Official in the public administration, the judiciary, the armed forces or political party; Senior Executive Officer of a state-owned enterprise of national importance, publicly owned Companies or Entities (including Charitable Organizations, Societies or Associations).
- (2) Immediate family members of such persons as set out under such as: the spouse, son / adopted son or stepson, daughter / adopted daughter or stepdaughter, father or step-father, mother or step-mother, brother or adopted brother or step-brother; and sister or adopted sister or step-sister.
- (3) Any natural person who has joint beneficial ownership of legal entities or legal arrangements including trusts, or any other close business relations with a person as set out under (1) & (2).
- (4) Any natural person who has sole beneficial ownership of legal entity, which is known to have been set up for the benefit de facto of the persons set out under (1) & (2).

**2. Please tick as appropriate:**

- a) ☐ I hereby declare that I am not a Politically Exposed Person as defined above.
- b) ☐ I hereby declare that I am a Politically Exposed Person and I hold / held Prominent Public Office as stated above.
- c) ☐ I hereby declare that I have / had personal or business relations with any such persons as stated above.
- d) ☐ I hereby declare that I have / had a close family likely to be involved with any such persons as stated above.

If you ticked b, c or d above, please give full details (name of person, position, domicile, contact details)

**Accuracy of Information:**

I hereby certify that the information provided herein are accurate and I undertake to provide you with any change that could affect directly or indirectly my current declaration upon the change being effective I hereby declare that the information provided herein cancel and supersede any information I may have previously provided to **Oslo International Trading LLC** by virtue of any signed agreement and/or document and/or form.

**Company Name:**

**Signature and Company Stamp:**

**Date:**

**STATEMENT OF CONFORMANCE OF RECYCLED GOLD**

\_\_\_\_\_ confirms that, based on our KYC due diligence practices, our recycled gold does not originate from illegal sources and is in conformance with the OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas and the Supplement on Gold and with Dodd-Frank Act's Section 1502 on conflict minerals requirements.

**Our precious metal originates from the following countries:**

|           |            |
|-----------|------------|
| <b>1.</b> | <b>6.</b>  |
| <b>2.</b> | <b>7.</b>  |
| <b>3.</b> | <b>8.</b>  |
| <b>4.</b> | <b>9.</b>  |
| <b>5.</b> | <b>10.</b> |

We confirm the gold sent is not:

- Sourced, mined, refined, re-melted, or manufactured in Venezuela after November 1<sup>st</sup>, 2017
- Sourced, mined, refined, re-melted, or manufactured in any Conflict Zone or Sanctioned Countries.
- In conflict with any sanctions against Russia, Russian legal entities, and persons, and is accompanied by documents which can prove this.
- Sourced from Industrial waste and doesn't contain any radioactive material traces.

\_\_\_\_\_ also confirms to keep record of all customers' data according to the local AML laws.

**Authorised Signatory:**

**Name:**

**Signature:**

**Stamp:**

## Suppliers Code of Ethics.

### 1. Purpose

This Standard governs the conduct of all Suppliers of all types and forms of precious metals to the Oslo International LLC. It sets the standards of ethical conduct that is required from the supplier community, provides for self-certification against all standards, validation of the self-certification, and procedures for proceeding or terminating contracts with suppliers that do not meet these standards.

### 2. Application

Social responsibility guides the operation Oslo International LLC in the conduct of its business in the global precious metals industry. This Standard has been designed to help Suppliers understand their responsibilities and to create an awareness of the business and ethical standards that they must follow in their business dealings with Oslo International LLC. The key attributes that we expect from our Suppliers are:

- Integrity
- Honesty and,
- The highest ethical standards

### 3. Administration and Interpretation

Enquiries, comments and recommendations related to this Standard and supporting Procedures must be communicated to the Compliance Officer of Oslo International LLC.

Definitions applicable to the understanding and application of the requirements contained in this Standard are located in Appendix A and Appendix B.

Suppliers must read, understand and accept in writing the following conditions of dealing with the Oslo International LLC

### 4. Compliance with Laws

Suppliers must comply with all applicable laws, rules and regulations in every jurisdiction in which they do business with Oslo International LLC. Local laws might change in restriction to this Standard in some instances. In such events, Suppliers are expected to comply with this Standard, even if the conduct would otherwise be legal under applicable laws. If local laws are more restrictive than this Standard, Suppliers are expected to, at a minimum, comply with applicable local laws.

### 5. UN Global Compact

The ten principles of the Global Compact are based on internationally recognized norms and conventions in four critical areas: Human Rights, Labor Standards, the Environment, and Anti-corruption. In all business dealings with Oslo International LLC, Suppliers must comply with the principles of the UN Global Compact (see appendix A for reference).

### 6. OECD Guidance/DMCC rules for Responsible Supply Chains for Gold and Other Precious Metals

In 2012 the OECD issued a "Supplement on Gold" to its paper on Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Area. This provides a common reference for all participants in the supply chain.

This is to ensure responsible sourcing and chain of custody of gold and other precious metals and to eliminate or at least mitigate the risk of direct or indirect support to any kind of conflict in accordance with international standards. Oslo International LLC is committed to adopting these practical guidelines and is also fully committed to uphold the DMCC rules for the ethical supply chain at all times.

It is the responsibility of every one of our suppliers to fully understand the OECD guidelines and DMCC Rules for RBD in the Gold and Precious Metal Supply Chain in order to ensure that they are in full compliant with the principals of responsible supply chain management of precious metals. (See Appendix B for reference)

### 7. Certification

Oslo International LLC will certify and approve suppliers and accept their products once the supplier has passed our specialized assessment process, verification, and monitoring procedures. Post certification, the supplier becomes a nominated entity to enter any deal with Oslo International LLC whenever required. The certification will occur at the outset of the relationship with the supplier and will be an ongoing process and subject to review at least annually.

Oslo International LLC has the right, but not the obligation, at its sole discretion to terminate the business relationship at any point if the standards required are not met by the supplier for any business-related reasons. At the time of any termination for the business relationship with the supplier, Oslo International LLC will decide at its sole discretion whether or not to disclose the reasons for any such action.

## **8. Acknowledgement of Policy by The Supplier**

I / WE acknowledge that I / WE have read and understand Oslo International LLC Suppliers Code of Ethics and Appendices and agree to always comply with its provisions during the business relationship with the company.

**Name:**

**Supplier:**

**Authorized Signature:**