Explanatory Note to Filling Up Form NP 784 (Cash Transaction Report) for Precious Stones and Metals Dealers (PSMD)

Disclaimer: Please use the Form NP 784 available at www.police.gov.sg. This is an explanatory note and NOT any of the following:

- a. the prescribed form under Section 17 of the Precious Stones and Precious Metals (Prevention of Money Laundering and Terrorism Financing) Act, or
- b. the form under Section 74A of the Pawnbrokers Act.

Note: All fields with * are mandatory. Complete Part IV and Part V only if the person named in Part III is not the owner of the cash/ asset-backed token/ commodity.

Field Name	Explanatory Notes
Part I – Reporting Institution's Information	
Name of Reporting Institution*	PSMD's full registered name.
Registration No./Foreign Entity Identification No.*	PSMD's registration number.
Country/ Region of Registration*	PSMD's country/ region of registration.
Address*	PSMD's principal place of business or main office or branch.
Reporting Institution's Reference No. (Invoice No.)*	The invoice number relating to the sales or purchase transaction. If the CTR relates to a designated transaction involving 2 or more sales or purchase transactions, enter all relevant invoice numbers.
Name of Reporting Officer*	Name as per identification document. The Reporting Officer is the owner or employee authorised to complete the form for the business that received the cash. He/she need not be the officer who conducted the transaction.
Designation*	Designation/Corporate title of Reporting Officer.
Contact No.*	PSMD's contact number or DID.
Fax No.*	PSMD's fax number.
Email*	PSMD's email address.

Field Name		Evalenatory Notes	
	Field Name Explanatory Notes		
Part II - Details of Cash Transaction		-11	
Fill in all cash transactions related to	a single designated transac	CTION.	
A CTP must be filled for each receive	nd or noid by a quetomor (ne	arean making ar receiving the each neumont) relating to a single designated	
		erson making or receiving the cash payment) relating to a <u>single designated</u>	
		customers/payers. (Note: If the customer has more than 3 transactions in a 3 transactions in one form and the remaining 2 transactions in a second	
		ond form need to be completed and both forms have to be signed.)	
Torri. Staple and Submit both forms to	byether. All fleids in the sec	ond form need to be completed and both forms have to be signed.)	
Situations in which CTRs are to be fil	lad include:		
		within the same day, and the total cash paid or received in relation to these	
sales or purchase transactions excee		within the same day, and the total cash paid of received in relation to these	
		de multiple cash payments or collected multiple cash amounts over a period	
of time and the total cash paid or rec			
Transaction Type* (select one)	☐ Received cash from a	Select "Received cash from a customer" if the Reporting Institution sold any	
Transaction Type (Scient one)		precious stone, precious metal, or precious product or asset-backed token,	
	customer	and received cash from customers as payment.	
	☐ Paid cash to a	and received cash from customers as payment.	
	customer	Select "Paid cash to a customer" if the Reporting Institution:	
		1. Is a secondhand goods dealer that purchased any precious stone,	
		precious metal, or precious product with cash from customers who	
		are not regulated dealers; or	
		2. Redeemed asset-backed tokens in exchange for cash.	
		2. Redeemed asset-backed tokens in exchange for cash.	
		Please attach separate forms if you have more than 1 transaction type to	
		file. All fields in the additional forms need to be completed and all forms	
		have to be signed.	
Transaction 1:			
Cash Receipt/Payment Date* (DD/MM/YYYY)		Date of receipt or payment of cash.	
Amount of Cash Received or Paid* (SGD or SGD equivalent)		SGD amount received/ paid in cash/ cash equivalent. If receipt/payment is	
		in foreign currency, convert the foreign currency to SGD equivalent. You	
		can use the actual conversion rate used in the transaction or when	
		depositing the cash into your bank account.	
		Full address of the place of business where the transaction advice was	
		issued.	

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Field Name		Explanatory Notes
Description of Commodity Transacted*		Briefly describe the commodity by providing the information, in the following order <quantity>;<product type="">; <brand, applicable="" if="">; <model, applicable="" if="">; <serial applicable="" if="" number,="">; <weight applicable="" carat,="" g="" if="" in=""> Example: - 2 pieces; gold bars; Suisse Gold; 1,000g, - 1 piece; watch; Rolex, RLX-SKYDWE0038 42mm; M121323232, - 1 piece; diamond ring; Tiffany and Co; Etoile-des, 12345678t; 1 Carat,</weight></serial></model,></brand,></product></quantity>
		- 0.2 units; asset backed token; Goldilocks
Commodity Type* (select all applicable)	 □ Precious Stones □ Precious Metals □ Precious Products □ Asset-Backed Tokens 	Check all applicable tick boxes provided. - Precious Stones e.g. Loose diamonds, others (sapphire, ruby, emerald, jade (including nephrite and jadeite) and pearl) - Precious Metals e.g. Gold bullion, non-gold bullion, silver, platinum, iridium, osmium, palladium, rhodium, ruthenium and alloy with at least 2% in weight of any of the abovementioned metals - Precious products e.g. Jewellery, watches, luxury ornaments, accessories and apparel, fortune telling/feng shui/astrology products, antiques and collector products (e.g. coinage), others - Asset-backed token e.g. Virtual assets, non-virtual assets such as gold receipts/ certificates
Name of Transacting Officer*		Full name (as per official identification) of Reporting Institution's officer who conducted the transaction.
Transacting Officer's Designation*		Designation/ corporate title of the Reporting Institution's officer who conducted the transaction.
Transaction 2: (if applicable)		•
Date of Transaction* (DD/MM/YYYY)		See explanatory notes of Transaction 1.
Amount Transacted* (SGD or SGD equivalent)		
Address/Location where Transaction was made* (if different from Transaction 1)		
Description of Commodity Transacted*		

Field Name		Explanatory Notes
Commodity Type* (select all	☐ Precious Stones	
applicable)	☐ Precious Metals	
	☐ Precious Products	
	☐ Asset-Backed Tokens	
Name of Transacting Officer* (if diffe		
Transacting Officer's Designation* (iii		
Transaction 3: (if applicable)		
Date of Transaction* (DD/MM/YYYY)	See explanatory notes of Transaction 1.
Amount Transacted* (SGD or SGD e	equivalent)	
Address/Location where Transaction from Transaction 1)	was made* (if different	
Description of Commodity Transacte	d*	
Commodity Type* (select all	☐ Precious Stones	
applicable)	☐ Precious Metals	
	☐ Precious Products	
	☐ Asset-Backed Tokens	
Name of Transacting Officer* (if diffe	erent from Transaction 1)	
Transacting Officer's Designation* (if different from Transaction 1)		
Part III - Identity of the Person Wh	o Transacted in Cash	
Identification information of the custo	mer (individual) who paid in	cash or received cash. This should be obtained from reliable and
	nment issued document bea	aring the photograph of the individual e.g. NRIC, passport, driver's licence,
employment pass or work permit).		
For cash received from customers,	☐ Yes	Check the tick box provided.
is the person making the cash	□ No	If you have also sked "Nia"
payment the owner of the cash?*/	(If you have checked	If you have checked "No", - Complete Part IV if the owner of the cash/ asset-backed token/
For cash paid to customers, is the	"No", please complete	commodity is a person.
person receiving the cash payment	Part IV or Part V).	- Complete Part V if the owner of the cash/ asset-backed token/
the owner of the asset-backed		commodity is a business.
token/ commodity?*		

Field Name Name of Person*		Explanatory Notes Full name of an individual who is the cash payer/ receiver. This should be obtained from reliable and independent sources (such as government issued document bearing the photograph of the individual e.g. NRIC, passport, driver's licence, employment pass or work permit). This should not be the name of an institution or business. If the cash payer/
		receiver is representing a business, select "No" for the person paying/ receiving the cash payment being the owner of cash/ asset-backed token/commodity transacted and complete both Part III and V.
Nationality/ Citizenship* Date of Birth* (DD/MM/Y)	YYY)	This should be obtained from reliable and independent sources (such as government issued document bearing the photograph of the individual e.g.
Gender*	☐ Male ☐ Female	NRIC, passport, driver's licence, employment pass or work permit). Check the tick box provided.
Address		Full address of cash payer/ receiver. If the individual is not residing in Singapore, you can fill in a foreign address.
Contact No.*		Fill in a local contact number. If the individual is not residing in Singapore, you can fill in a foreign contact number (including country/region and area code).
Occupation*		Describe the specific nature of the occupation. Where possible, refrain from using generic terms such as "consultant" or "professional" and provide more description on the nature of work such as "IT consultant" or "software engineer".
Identification No.*		This should be obtained from reliable and independent sources (such as government issued document bearing the photograph of the individual e.g. NRIC, passport, driver's licence, employment pass or work permit). (if applicable)

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Field Name		Explanatory Notes
Identification Type*	□ NRIC	Check the tick box provided.
Tuestamouner Type	_	"Others" could include employment pass, work permit, or any other
	☐ Passport	government issued document that specifies an identification number and
	☐ Others	bears a photograph of the individual.
0 1 / 5 : (1 *	(please specify)	
Country/ Region of Issue*		This should be obtained from reliable and independent sources (such as
F D - 1 - + (DD/M 400000)	//s!!\	government issued document bearing the photograph of the individual e.g.
Expiry Date* (DD/MM/YYYY) (іт арріісаріе)	NRIC, passport, driver's licence, employment pass or work permit). (if
Don't IV I I don't the of the Done	on Miles Owns the Cook! As	applicable)
Part IV - Identity of the Perso	on who owns the Cash/ As	set-Backed Token/ Commodity (if applicable)
		he cash/ asset-backed token/ commodity. All fields in the additional forms need to
be completed and all forms ha Name of Person*	ve to be signed.	Full name of individual who is the each/spect hadred taken/sammedity
Name of Person		Full name of individual who is the cash/ asset-backed token/ commodity
		owner.
		This should be obtained from reliable and independent sources (such as
		government issued document bearing the photograph of the individual e.g.
		NRIC, passport, driver's licence, employment pass or work permit). (if applicable)
Nationality/ Citizenship*		This should be obtained from reliable and independent sources (such as
Tradictionity/ Chilzeriemp		government issued document bearing the photograph of the individual e.g. NRIC, passport, driver's licence, employment pass or work permit). (if applicable)
Date of Birth* (DD/MM/YYYY)		
Gender*	□ Mala	Check the tick box provided. (if applicable)
Gerider	□ Male	Check the tick box provided. (if applicable)
	☐ Female	
Address		Full address of cash/ asset-backed token/ commodity owner.
		If the individual is not residing in Singapore, you can fill in a foreign
		address. (if applicable)
Contact No.*		Fill in a local or foreign contact number.
		If the individual is not residing in Singapore, you can fill in a foreign contact
Î.		number (including country/ region and area code), (if applicable)

Field Name		Explanatory Notes
Occupation*		Describe the specific nature of the occupation. Where possible, refrain from using generic terms such as "consultant" or "professional" and provide more description on the nature of work such as "IT consultant" or "software engineer". (if applicable)
Identification No.*		This should be obtained from reliable and independent sources (such as government issued document bearing the photograph of the individual e.g. NRIC, passport, driver's licence, employment pass or work permit). (if applicable)
Identification Type*	□ NRIC □ Passport □ Others (please specify)	Check the tick box provided. "Others" could include employment pass, work permit, or any other government issued document that specifies an identification number and bears a photograph of the individual. (if applicable)
Country/ Region of Issue* Expiry Date* (DD/MM/YYYY) (if applicable)		This should be obtained from reliable and independent sources (such as government issued document bearing the photograph of the individual e.g. NRIC, passport, driver's licence, employment pass or work permit). (if applicable)
Relationship of the person named in Part III to the person named above*	☐ Family/Relative ☐ Friend ☐ Employee ☐ Agent ☐ Others (please specify)	Check the tick box provided. "Others" could include business associate. (if applicable)

Field Name	Explanatory Notes	
Part V - Identity of the Business That Owns the Cash/ As		
Please attach separate forms if more than 1 business owns the cash/ asset-backed token/ commodity. All fields in the additional forms need		
to be completed and all forms have to be signed.		
Name of Business*	A business refers to any of the following: a company, corporation, limited liability partnership, institution, sole proprietorship, partnership, society, club, trust, foundation.	
	Registered name of business which is the cash/ asset-backed token/ commodity owner.	
	This should be obtained from reliable and independent sources (such as government issued document e.g. Accounting and Corporate Regulatory Authority's Business Profile or the foreign country/ region's business registry company registration records). (if applicable)	
Registration No./Foreign Entity Identification No.*	Unique Entity Number (UEN) or foreign entity registration number of cash/ asset-backed token/ commodity owner.	
	This should be obtained from reliable and independent sources (such as government issued document e.g. Accounting and Corporate Regulatory Authority's Business Profile or the foreign country/ region's business registry company registration records). (if applicable)	
Country/ Region of Registration*	Country/ Region of registration of cash/ asset-backed token/ commodity owner.	
	This should be obtained from reliable and independent sources (such as government issued document e.g. Accounting and Corporate Regulatory Authority's Business Profile or the foreign country/ region's business registry company registration records). (if applicable)	
Address	Full address of cash/ asset-backed token/ commodity owner.	
	If the business is not residing in Singapore, you can fill in a foreign address (if applicable).	

Field Name		Explanatory Notes
Is the business a dealer in precious stones, precious metals or precious products?*	☐ Yes ☐ No (please specify the nature of business)	Select "Yes" if the business: (a) manufactures, sells, offers for sale, imports for sale, possesses for sale or purchases for the purposes of resale any precious stone, precious metal or precious product (PSPM); (b) sells or redeems any token, certificate or other instrument backed by one or more PSPMs that entitles the holder to the PSPM or part of it; or (c) acts as an intermediary for (a) or (b) (e.g. broker, auctioneer, an exchange or any provider of a trading or clearing facility). Select "No" if otherwise. If the "No" box is checked, specify the nature of business. (if applicable)
Relationship of the person named in Part III to the business named above*	☐ Employee ☐ Agent ☐ Others (please specify)	Check the tick box provided. "Others" could include business associate, director, shareholder and owner. (if applicable)
Part VI - Declaration		
I declare that the information provide Name of Reporting Officer*	d in this report is full and ac	Name as per identification document. The Reporting Officer is the owner or
Name of Reporting Officer		employee authorised to complete the form for the business that received the cash. He/she need not be the officer who conducted the transaction.
Identification Number of Reporting O	fficer*	Identification number of official identification of Reporting Officer.
Identification Type*	□ NRIC□ FIN□ Passport□ Foreign ID No	Check the tick box provided.
Signature*		Reporting Officer to sign on the form.
Date of declaration* (DD/MM/YYYY)	_	Declaration must be made and submitted within 15 business days after the date on which the cash transaction is entered into (i.e. a day other than a Saturday, Sunday or public holidays).

General Information

- 1. It is an offence under section 27 of the Precious Stones and Precious Metals (Prevention of Money Laundering and Terrorism Financing) Act and section 70 of the Pawnbrokers Act to provide any information that is materially false or misleading or to omit to provide any information knowing or having reason to believe that such omission will create a false or misleading impression.
- 2. Please submit the following:
 - a. The <u>original</u> signed report by post to the Suspicious Transaction Reporting Office at 391 New Bridge Road, #06-701, Police Cantonment Complex Block D, Singapore 088762; and
 - b. A <u>copy</u> of the signed report separately by post to the Anti-Money Laundering/ Countering the Financing of Terrorism Division at 45 Maxwell Road, #07-11, The URA Centre (East Wing), Singapore 069118 (if you are a regulated dealer) or the Registry of Pawnbrokers at 45 Maxwell Road, #07-11, The URA Centre (East Wing), Singapore 069118 (if you are a pawnbroker).

For clarification, you may contact the Suspicious Transaction Reporting Office (STRO) at 6324 9836 or stro@spf.gov.sg.