

# Form Guide for STR Form

(Version 12 August 2025)


# IMPORTANT – USE UPDATED ADOBE SOFTWARE

If you submit STR Forms using an incompatible Adobe software, you may be required to file your STR Form again.

Use only the following Adobe software.

1. **Acrobat Reader DC (release note 15 or later); OR**
2. **Acrobat XI (release note 11 or later)**


**Note:**

-  Adobe Acrobat Reader DC is the **preferred software**, it is available for **free** on the **Adobe website**.
- If you have created draft STR Forms with outdated Adobe software or third party (non-Adobe) PDF editors, you should
  - Delete the old draft STR Forms or templates;
  - Download a fresh STR Form template from the SONAR platform; and
  - Use either of the above Adobe software to create a new draft STR Form.

# OVERVIEW

STR No:

STR Date of Submission:



Reporting Institution

Account Information

Entity Information

Policy Information

Suspicious Transactions

Reasons for Suspicion

Validation Summary

Part I Reporting Institution

Reporting Institution Particulars

Institution Type\*

Business Type\* 

Select the most appropriate Institution Type as licensed by your regulatory agency for your designated sector. If none of the options apply, select 'Others'.

Name of Reporting Institution\*

UEN of Reporting Institution\*

Internal Reporting Institution Reference Number\*

Reporting Institution

Account Information

Entity Information

Policy Information

Suspicious Transactions

Reasons for Suspicion

Validation Summary

Part VI Validation Summary

Reporting Institution Status	Validation Required	Account Information Status	Validation Required
Entity Information Status	Validation Required	Suspicious Transactions Status	Validation Required
Reason for Suspicion Status	Validation Required		

Once all of the sections are validated successfully, the form will be enabled for submission.

Disabled

Click on the **<SAVE>** button to save changes to your draft STR. This draft will be saved onto your local device.

Greyed out fields will be auto-populated after form is uploaded onto SONAR.




You can click on the tab headers to quickly access the different sections. No input is required for sections which are not applicable to your Institution Type.

When you hover your mouse over active fields, a short description of the field will appear. You may refer to the descriptions of the fields if you are unsure of how to complete the STR.

**Use a unique Internal Reference No. for each STR filed.** Quote this Internal Reference No. when corresponding with STRO on the submitted report.

Under the tab “Validation Summary”, the validation status of each section you are required to complete is displayed. After all sections have been validated, the form will be “Enabled” for submission. **Non-validated forms and forms not “Enabled” for submission will be rejected.**

# TAB – REPORTING INSTITUTION

Part I Reporting Institution	
Reporting Institution Particulars	
Institution Type*	<input type="text"/>
Business Type* 	<input type="text"/>
Name of Reporting Institution* 	<input type="text"/>
UEN of Reporting Institution* 	Internal Reporting Institution Reference Number* <input type="text"/>

Select your Institution Type and Business Type (according to your licensed/main business activity). The Institution Type selected will control the fields you see in the STR. Hence, **do not change the Institution Type** after you have amended / added data to other fields in the Form.

**\*NEW\*** The following Institution Types have been added and removed respectively.

Added	Institution Type (IT)	Business Type (BT)
	Gambling Operator (Non-Casino)	Operator of betting operations and lotteries
		Gaming Machine Room Operator
		Other Gambling Operator
	Non-Profit/Not-For-Profit Organisation (Charity)	Company Limited by Guarantee Society
		Trust
	Non-Profit/Not-For-Profit Organisation (Others)	Company Limited by Guarantee Mosque Society
Removed	Cooperative Society	-
	Corporate Service Provider/ Qualified Individual (previously was Filing Agent/Qualified Individual)	Filing For Own Company
		Filing On Behalf of Third Party

Removed	Institution Type (IT)	Business Type (BT)
	Non-Profit/Not-For-Profit Organisation	Company Limited by Guarantee Charity Mosque Cooperative Society Society
	Others	Exempt Operator (Remote Gambling)

# TAB – REPORTING INSTITUTION

Part I Reporting Institution	
Reporting Institution Particulars	
Institution Type*	
<input type="text"/>	
Business Type*	
<input type="text"/>	
Name of Reporting Institution*	
<input type="text"/>	
UEN of Reporting Institution*	Internal Reporting Institution Reference Number*
<input type="text"/>	<input type="text"/>
Notice Reference Number* <input type="checkbox"/> N/A	
<input type="text" value="OTHERS"/>	
If others	<input type="text"/>
Contact Officer Particulars	
Contact Officer	
Name*	
<input type="text"/>	
Designation*	Direct Contact Number*
<input type="text"/>	+ <input type="text"/> - <input type="text"/> - <input type="text"/>
Email*	
<input type="text"/>	
Alternate Email	
<input type="text"/>	
Once all of the fields are validated successfully, the form will be enabled for submission.	
<input type="button" value="Validate Reporting Institution"/>	
Validation Status	Validation Required
Validated Time Stamp	21/11/2022 11:46:14 AM

Notice Reference No. (NRN) is a mandatory field. If you are not filing an STR pursuant to a crime advisory/bulletin/notice, please select the “N/A” checkbox.

Notices exclude the MAS 626 Notice and instead refer to ad-hoc notices that your regulator or STRO may publish. In such Notices, there will be explicit instructions for you to enter the NRN.

If the NRN applicable to the STR you are filing is not listed in the dropdown list, please select “Others” from the dropdown list and enter the NRN in the free-text field that will appear. The entry in this free-text field will be validated against the list of valid NRNs maintained in STRO’s database.

**\*NEW\*** The following NRNs have been added to the dropdown list:

- |                               |  |
|-------------------------------|--|
| 1. ACIP-ADVISORY-PCN MAY 2025 | } These were previously validated NRNs in the ‘OTHERS’ section |
| 2. INFONOTE-0525              |  |

**\*NEW\*** An area code section has been added to all contact number fields.

Validation has to be done at the end of every section. The validation will check that all mandatory fields have been completed and that the information has been keyed in the expected format (e.g. Date is in DD/MM/YYYY format). An error message will appear if validation fails and fields with errors will be highlighted for your attention.

# TAB – ACCOUNT INFORMATION

**Part II** **Account Information**

Are there account(s) involved in the suspicious activity you are reporting on? ☒ Yes ☐ No

**Account 1**  

+

-

Please provide details of any accounts related to the suspicious transaction(s). If there are more than one such account known to the reporting institution, click on the "+" to add more records.

^

**Account Details**

Select "Yes" and provide **ALL** known accounts **(including accounts not maintained with you)** unless there is no possibility of the account(s) being linked to the suspected drug dealing or criminal conduct.

Note: For STRs filed due to adverse news on the entity(ies), even if the review of accounts did not uncover any suspicious transactions, you cannot exclude the possibility that tainted funds may have passed through these accounts. Hence, you should still select "Yes" and provide the account information.

Account information, e.g. bank name and account number, is useful for STRO's analysis of the STR filed and for law enforcement agencies to quickly detect relevant STRs in the STRO database. If the information is not provided in the designated fields or only provided in the <Reason(s) for Suspicion> free text field, STRO and law enforcement agencies may not be able to quickly detect the relevant STRs.

Use this arrow to minimize the section.

Use the "+" button to add more accounts. You are expected to provide full details of all accounts involved in the suspicious transaction(s) to the best of your knowledge.

**Account Details**

Is the known account maintained with the reporting institution? ☒ Yes ☐ No

Name of Financial Institution

We do not have the information on the Authorised Signatory. ☐

We do not have the information on the Beneficial Owner. ☐

Account Number\*

Type of Account\*

☐ Savings ☐ Investment ☐ Unknown

☐ Current ☐ Trust ☐ Fixed Deposit

☐ Betting ☐ Credit / Debit Card ☐ Loan

☐ Clearing ☐ Virtual Currency ☐ Payment Account

Date Account Opened\* (DD/MM/YYYY)

Account Balance\* ☐ DR ☐ CR

Account Ownership\* ☐ Singly Held ☐ Jointly Held ☐ N/A

The maximum no. of accounts that can be added is **40 accounts**. If there are more than 40 accounts, enter the account information for 40 accounts in the form and the remaining accounts in a .csv file (upload as attachment). The .csv file should contain the same fields as the Account Information section.

Select "Yes" if the account involved is maintained with your institution. Select "No" if the account is not maintained with your institution. Only basic information (Bank Name, Account Number, Type of Account) will be collected for accounts not held with your institution.

There are unknown checkboxes for Account Information as follows:  
"We do not have the information on the Authorised Signatory" (This is available to all ITBTs)  
"We do not have the information on the Beneficial Owner" (This is available to all ITBTs)

The validation for the respective relationship will be removed if the checkbox is checked.

The maximum length for Account Numbers in all sections (including Sender & Receiver Wallet Addresses) is **60**



# TAB – ACCOUNT INFORMATION

Date Account Opened* (DD/MM/YYYY)	
Account Balance* <input type="radio"/> DR <input type="radio"/> CR	
Account Ownership* <input type="radio"/> Singly Held <input type="radio"/> Jointly Held <input type="radio"/> N/A	
<b>Other accounts maintained by the same entity(s) but not part of this STR</b>	
Account Number	
Account Status* <input type="radio"/> Active <input type="radio"/> Dormant <input type="radio"/> Suspended <input type="radio"/> Closed	
Date Account Opened* (DD/MM/YYYY)	Date of Account Suspension/Closure* (DD/MM/YYYY)

If the same entity maintains multiple accounts with your reporting institution, please provide full details of accounts which are involved in the suspicious transactions by adding more accounts.

For accounts which are not linked to the suspicious activity, you may key in the account numbers in this field (do not include “-” or space between numbers or description of the accounts).

Use the “+” button to add more accounts.

Account Status and Date Account Opened are mandatory when an "Other Account" is provided.

Date of Account Suspension/Closure is mandatory when the Account Status of the "Other Account" is Suspended/Closed.

<b>Account Status</b>
Account Status* <input type="radio"/> Active <input type="radio"/> Dormant <input type="radio"/> Suspended <input checked="" type="radio"/> Closed
<input type="checkbox"/> Account has been seized by a Law Enforcement Agency
<input type="checkbox"/> The reporting institution has taken measures against the account
<b>Handling Of Account Balance Upon Account Closure</b>
<i>You have indicated that the reported account is closed. Please provide details on how the account balance was handled.</i>
Date of Account Suspension/Closure* (DD/MM/YYYY)
Account Balance was returned via: (select 1)*
<input type="radio"/> Remitted to Local Beneficiary
<input type="radio"/> Remitted to Foreign Beneficiary
<input type="radio"/> Returned in cash / cash equivalent (cashier's order, cheque, etc)
<input type="radio"/> N/A - No instructions received
Account Information Updated as at* (DD/MM/YYYY)
Once all of the fields are validated successfully, the form will be enabled for submission.
Validation Status <b>Validation Required</b> Validated Time Stamp

“Account Status” here refers to the main account reported on in the STR

If “Closed” is selected, you should indicate the handling of the account balance upon its closure – i.e. how and where the remaining funds in the account were disbursed.

Note: If the information on the flow of funds is not available at the time of filing the STR, but becomes available later (e.g. account is closed later or cashier's order is cashed at a later date), you should indicate that the information is currently not available and promptly file another follow-up STR upon receipt of such information.

# TAB – ACCOUNT INFORMATION

## Account Status

Account Status\* ☐ Active ☐ Dormant ☐ Suspended ☐ Closed

☒ Account has been seized by a Law Enforcement Agency

Law Enforcement Agency Name\*

Law Enforcement Agency Case Reference No.\*

Law Enforcement Agency Contact Officer Name\*

Law Enforcement Agency Contact No.\*

+  -  -

Date of Seizure\*

☒ The reporting institution has taken measures against the account

Describe Measures Taken\* No. of Characters (Max): 100

Date Action Taken\* (DD/MM/YYYY)

Account Information Updated as at\* (DD/MM/YYYY)

Once all of the fields are validated successfully, the form will be enabled for submission.

Validate Account Information

Validation Status

Validation Required

Validated Time Stamp

Check “Account has been seized by a Law Enforcement Agency” and provide details on the law enforcement agency and the seizure order. The details should be found on the seizure order.

Note:

- The information will allow STRO to quickly disseminate the relevant information to the law enforcement agency interested in the matter.
- You should respond to the seizure order and/or production orders.

Check “The reporting institution has taken measures against the account” and provide details on measures taken. For example, enhanced monitoring, reporting institution to close account.

Note: There is no need to indicate ‘STR filed’ as a measure taken.



# TAB – ENTITY INFORMATION

Part III Entity Profile	
<div><div>Entity 1</div><div><div>+</div><div>-</div></div></div> <div>Please provide details of all entities related to the suspicious transaction you are reporting on. This includes account owners, authorized signatories and ultimate beneficial owners of the reported suspicious accounts as well as known transacting parties of the suspicious transaction.</div>	
Is this entity related to the reported account(s)?* <input checked="" type="radio"/> Yes <input type="radio"/> No	
<div>Relationship to Account 1</div> <div><div><div>Select Account Number*</div><div>123456789</div></div><div><div>Relationship of Entity to Account*</div><div>Authorised Signatory</div></div></div> <div><div><div>Date of Appointment as Authorised Signatory / Beneficial Owner*</div><div><input type="checkbox"/> Unknown</div></div><div><div>Relationship of Entity to Account Holder*</div><div><input type="checkbox"/> Unknown</div></div></div>	
<div>Relationship to Account 2</div> <div><div><div>Select Account Number*</div><div>123456789</div></div><div><div>Relationship of Entity to Account*</div><div>Beneficial Owner</div></div></div> <div><div><div>Date of Appointment as Authorised Signatory / Beneficial Owner*</div><div><input type="checkbox"/> Unknown</div></div><div><div>Relationship of Entity to Account Holder*</div><div><input type="checkbox"/> Unknown</div></div></div>	
<div>Entity Particulars</div> <div><div>Profile Information*</div><div><div><input type="checkbox"/> Entity featured in foreign adverse news/sanction lists</div><div><input type="checkbox"/> Entity featured in local adverse news/sanction lists</div><div><input type="checkbox"/> Entity not featured in adverse news/sanction lists but suspected of committing an offence</div><div><input type="checkbox"/> Entity is a Politically Exposed Person (PEP)</div><div><input type="checkbox"/> Entity is a relative/close associate of a Politically Exposed Person (PEP)</div><div><input type="checkbox"/> None of the Above</div></div></div> <div><div><input checked="" type="radio"/> Check if adding Person Entity</div><div><input type="radio"/> Check if adding Business Entity</div></div>	

Use the “+” button to add more entities.

Provide full details of **ALL entities** involved in the suspicious transaction(s), include **joint accounts holders, authorised signatories and beneficial owners** of the accounts and policies added in in Part II <Account Information> section or Part IV <Policy Information> section.

Note: Entity information e.g. name, identifiers, address and contact numbers provided in the designated fields (should not be in the <Reason(s) for Suspicion> free text field), is useful for STRO’s quick analysis of the STR filed and for law enforcement agencies to accurately determine their entities of interest.

The maximum no. of entities that can be added is 40 entities. If there are more than 40 entities, enter the entity profiles for 40 entities in the form and the remaining entities in a .csv file (upload as attachment). The .csv file should contain the same fields as the Entity Information section.

Select “Yes” and provide details if the entity is related to the accounts added in the Account Information section. For every account added, the account holder must be added as an entity in the Entity Information section.

Note:

- Relationship to Account section is only displayed if you select “Yes” at the “Is this entity related to the reported account(s)?” field.
- If the entity has 2 or more relationships to the account(s), use the “+” button to add more relationships (up to 20 relationships).
- It is mandatory to provide authorised signatory(ies) and beneficial owner(s) of business accounts.
- There should be at least 2 account holders if the account is a joint account. Account holders of joint accounts must be Person Entity.

Indicate whether the entity is a Person Entity or Business Entity. This will change the fields that you have to complete for this section. **Do not change this selection after you have completed the section to prevent loss of information.** By default, the form shows the fields required for a Person Entity.

# TAB – ENTITY INFORMATION

Part III Entity Profile	
<b>Entity 1</b> <div><div>+</div><div>-</div></div>	Please provide details of all entities related to the suspicious transaction you are reporting on. This includes account owners, authorized signatories and ultimate beneficial owners of the reported suspicious accounts as well as known transacting parties of the suspicious transaction.
Is this entity related to the reported account(s)?* <input checked="" type="radio"/> Yes <input type="radio"/> No	
<b>Relationship to Account 1</b> <div><div>+</div><div>-</div></div>	
Select Account Number* 123456789	Relationship of Entity to Account* Authorised Signatory
Date of Appointment as Authorised Signatory / Beneficial Owner* <input checked="" type="checkbox"/> Unknown	Relationship of Entity to Account Holder* <input type="checkbox"/> Unknown Director
<b>Relationship to Account 2</b> <div><div>+</div><div>-</div></div>	
Select Account Number* 123456789	Relationship of Entity to Account* Beneficial Owner
Date of Appointment as Authorised Signatory / Beneficial Owner* <input checked="" type="checkbox"/> Unknown	Relationship of Entity to Account Holder* <input type="checkbox"/> Unknown Director
<b>Entity Particulars</b>	
<b>Profile Information*</b>	
<input type="checkbox"/> Entity featured in foreign adverse news/sanction lists	
<input type="checkbox"/> Entity featured in local adverse news/sanction lists	
<input type="checkbox"/> Entity not featured in adverse news/sanction lists but suspected of committing an offence	
<input type="checkbox"/> Entity is a Politically Exposed Person (PEP)	
<input type="checkbox"/> Entity is a relative/close associate of a Politically Exposed Person (PEP)	
<input type="checkbox"/> None of the Above	
<input checked="" type="radio"/> Check if adding Person Entity	
<input type="radio"/> Check if adding Business Entity	

## Entering Directorship Details

Director of a company is NOT the account holder of the company's account, but could be the beneficial owner and/or authorized signatory.

If your reporting institution has full ownership information of a corporate bank account and the company is beneficially-owned by 1 director, you may enter the relationship by creating **2 entities in the STR: 1 person entity (director) and 1 business entity.**

Note: The relationship information is critical in the scenario where the account holder is a foreign corporate entity and such information is only available to reporting institution during account opening CDD process.

When "Others" is selected for "Relationship of Entity to Account" or "Relationship of Entity to Account Holder", a free-text field "If others, please specify" will appear. The values entered in the free-text field will be rejected if they resemble values found in the drop-down list.

There are "Unknown" checkboxes for the date of appointment as Authorised Signatory/Beneficial Owner. Select this checkbox if you do not have the relevant dates of appointments; the date field will then be greyed out.

# TAB – ENTITY INFORMATION

First Name and Middle Name, if any*	<input type="checkbox"/> Unknown
<input type="text"/>	
Last Name (Family/Surname)*	<input type="checkbox"/> Unknown
<input type="text"/>	
Sex*	
<input checked="" type="radio"/> Male <input type="radio"/> Female	
Country/Region of Birth	
<input type="text"/>	
Nationality/Citizenship*	<input type="checkbox"/> Unknown
<input type="text"/>	<input type="button" value="+"/> <input type="button" value="-"/>
Tax Residency*	<input type="checkbox"/> Unknown
<input type="text"/>	<input type="button" value="+"/> <input type="button" value="-"/>

“Unknown” checkboxes are provided for most mandatory fields. If you are unable to obtain the information, select “Unknown” and the field will be disabled.

Provide the name of the entity, based on official identification document as far as possible.

If the separation between <First Name> and <Last Name> is not apparent, provide the full name as it appears in the identification documentation under <First Name and Middle Name, if any> and click unknown for <Last Name>.

For example, Emily Tan Ah Goh. <First Name and Middle Name, if any> = “Emily Tan Ah Goh” and click unknown for <Last Name>.

You should **NOT** repeat the full name for both **<First Name and Middle Name, if any>** and **<Last Name>** fields. This will corrupt the data and make it more difficult for STRO and law enforcement agencies to detect the relevant STR.

# TAB – ENTITY INFORMATION

## Entity Employment Information

Occupation\*

☐ Unknown

**\*NEW\*** The Occupation dropdown list has been updated.

List of Occupation dropdown codes				
Accountant (excluding tax accountant)	Compliance officer/Risk analyst (financial)	Kitchen operations head/supervisor	Other physical/engineering science technician N.E.C.	School principal
Actor	Domestic helper/cleaner	Machinery mechanic/fitter/repairer N.E.C.	Other sales and related associate professional N.E.C.	Securities/Finance broker
Administration manager	Education/Training institution manager N.E.C.	Management executive	Pawnbroker	Security supervisor
Advocate/Solicitor (practising)	Electrician	Managing director/Chief executive officer	Personnel/Human resource officer	Senior government official
Auditor (accounting)	Financial analyst	Marketing strategy/planning professional	Photographer	Social worker (general)
Bill collector and related worker N.E.C.	Financial/Investment adviser	Medical scientist	Premises/Facilities maintenance officer	Software and applications developer/analyst N.E.C.
Building architect	Foreign exchange dealer	Money changer	Private-hire car driver	Statistical officer/Data analyst
Building maintenance worker	General practitioner/physician	Moneylender	Radio/Television presenter	Student
Chief operating officer/General Manager	General surgeon	NS	Real estate agent	Supervisor/General foreman (metal/machinery and related trades)
Cleaning supervisor	Graphic designer	Odd job person	Receptionist/Customer service/information clerk N.E.C.	Tax accountant
Clinical psychologist	Housewife	Other engineering professional N.E.C.	Registered nurse and related nursing professional (excluding enrolled nurse)	Tax associate professional
Clinical research professional	Insurance sales agent/broker	Other government associate professional N.E.C.	Religious professional N.E.C.	Teaching professional N.E.C.
Commercial airline pilot	Insurance underwriter	Other health professional N.E.C.	Retiree	Trade broker
Company director	Interior designer	Other personal services worker N.E.C.	Sales professional (institutional sales of financial products)	Unemployed

# TAB – ENTITY INFORMATION

## Part III Entity Profile

### Entity 1



Please provide details of all entities related to the suspicious transaction you are reporting on. This includes account owners, authorized signatories and ultimate beneficial owners of the reported suspicious accounts as well as known transacting parties of the suspicious transaction.

Is this entity related to the reported account(s)?\* ☒ Yes ☐ No

#### Relationship to Account



Select Account Number\*

Relationship of Entity to Account\*

Others

If others, please specify:

Relationship of Entity to Account Holder\*

☐ Unknown

**\*NEW\*** A Business Entity can be added as a related entity to a **Joint Account** if the Relationship of Entity to Account is 'Others'.

#### Entity Particulars

##### Profile Information\*

- ☐ Entity featured in foreign adverse news/sanction lists
- ☐ Entity featured in local adverse news/sanction lists
- ☐ Entity not featured in adverse news/sanction lists but suspected of committing an offence
- ☐ Entity is a Politically Exposed Person (PEP)
- ☐ Entity is a relative/close associate of a Politically Exposed Person (PEP)
- ☐ None of the Above

☐ Check if adding Person Entity

☒ Check if adding Business Entity



# TAB – ENTITY INFORMATION

<input type="radio"/> Check if adding Person Entity	
<input checked="" type="radio"/> Check if adding Business Entity	
Entity's Legal Name* <input type="checkbox"/> Unknown	
Type of Legal Entity	Main Business Activity* <input type="checkbox"/> Unknown
Net Assets (SGD)* <input type="checkbox"/> Unknown	
SGD	
Tax Residency* <input type="checkbox"/> Unknown	

Entity Identification Information	
Identification/Registration Number* <input type="checkbox"/> Unknown	Country/Region of Issue/Registration* <input type="checkbox"/> Unknown

Entity Contact Information	
Address* <input type="checkbox"/> Unknown <input type="checkbox"/> Partial Address <input type="checkbox"/> Same as Entity 1	
Address	
Block/House No	Street Name
Building Name	Floor No
City	State
Postal/ZIP Code	Country/Region
Contact* <input type="checkbox"/> Unknown	
Contact Number	Contact Type

Entity Other Information	
Entity's Role in Suspicious Activity* (Tick all that is applicable)	
<input type="checkbox"/> Payor/Sender	<input type="checkbox"/> Payee/Receiver
<input type="checkbox"/> Intermediary	<input type="checkbox"/> Claimant
<input checked="" type="checkbox"/> No Role	
<input type="checkbox"/> Others (please specify)	

**\*NEW\*** The Type of Legal Entity dropdown list has been updated.

New Type of Legal Entity list	Businesses
	Foreign Companies
	Local Companies
	Limited Liability Partnerships
	Limited Partnerships
	Variable Capital Companies
	Charities and Institutions of a Public Character
	Cooperative Societies
	Other types of Legal Entity

Tax Residency is a mandatory field for Business Entities. If you do not know the Tax Residency of the Business, check the "Unknown" checkbox.

- Select "Unknown" if the address of the entity is not available.
- Select "Partial Address" if you do not have all mandatory information required in this section.
- Select "Same as Entity 1" if the entities share the same address

Select "No Role" if the entity is a director/shareholder/authorised signatory/beneficial owner of a company but is not directly involved in the suspicious transaction.



# TAB – ENTITY INFORMATION

This section will appear when 2 or more entities are entered in “Entity Information”.

If the account holder is a Business Entity, you should

- enter the authorized signatory, beneficial owner and/or director as a Person Entity in the “Entity Information” section
- Link the Business Entity to the relevant Person Entity.
- Enter “Business Partners/ Business/ Formal Relationship in <Known Relationship> field.

☐ There is no known relationships between the entities in this report

**Relationship Information**

Please indicate any known relationship(s) between the reported entities. If there are no known relationship, please check the checkbox "There are no known relationships between the entities in this report".

Entity 1	Entity 2	Known Relationship
<div></div>	<div></div>	<div></div>

Once all of the fields are validated successfully, the form will be enabled for submission.

Validate Entity Information

Validation Status

Validation Required

Validated Time Stamp

Illogical relationships will be rejected.  
-For example, if Entity A and Entity B are declared as Parent-Child, then Entity A and Entity B cannot be declared as Spouses.

Select the related entities and their relationship.

Use the “+” button to add more relationships.

# TAB – POLICY INFORMATION

Part IV Policy Information	
<input type="checkbox"/> No known policies involved in suspicious transaction	
<b>Policy 1</b> Please provide details of any known policies held or owned by the entity reported above. If there are no known policy, please check the checkbox "No known policies involved in the suspicious transaction". If there are more than one of such insurance policy known to the reporting institution, click on the "+" to add more records.	
<div>Entity to Policy Relationship</div> <div>Related Entity* <input type="text"/></div> <div>Relationship of Entity to Policy* <input type="text"/></div>	
<div>Policy Details</div> <div>Policy Number* <input type="text"/></div> <div>Type of Policy* <input type="text"/></div> <div>Date of Commencement* <input type="text"/></div> <div><input type="checkbox"/> Unknown</div> <div>Surrender Value <input type="text"/></div> <div>Premium Payment* <input type="radio"/> Regular <input type="radio"/> Single</div> <div>Sum Assured* <input type="text"/></div> <div>Premium (in original currency)* <input type="text"/></div> <div>Premium (in SGD) SGD <input type="text"/></div> <div>Date when payment was received <input type="text"/></div>	

This section will appear when the Institution Type selected in the Reporting Institution tab is "Direct Insurance", "Reinsurance" or "Financial Adviser".

Use the "+" button to add more policies.

Provide full details of all policies involved in the suspicious transaction(s) to the best of your knowledge.

You may enter up to 10 policies. If there are more than 10 policies, enter the policy information for 10 policies in the form and the remaining policies in a .csv file (upload as attachment). The .csv file should contain the same fields as the Policy Information section.

Select the related entities and their relationship. Use the "+" button to add more relationships.

Indicate whether the premium is paid regularly or in a single payment. If Regular is selected, please indicate the Premium Interval.

# TAB – SUSPICIOUS TRANSACTIONS

Part V Suspicious Transaction(s)	
<b>Suspicious Transaction(s)</b>	Enter details of any suspicious transactions noted by the reporting institution. You may also wish to upload the transaction details as a Comma Separated Values (.csv) file.
Total Amount Involved (Actual Transactions)*	SGD 30,000,000 to <SGD 50,000,000 <input type="checkbox"/> Unknown
Total Amount Involved (Attempted/Rejected Transactions)*	SGD 0 to <SGD 20,000 <input type="checkbox"/> Unknown
<b>Transaction</b> <input type="button" value="+"/> <input type="button" value="-"/>	Please Indicate <input checked="" type="radio"/> Actual <input type="radio"/> Attempted/Rejected
Select the Account Number for which this transaction relates to	
1234567890	
Type of Transaction	
Amount in Original Currency	
<input type="checkbox"/> Check this box if the suspicious transaction(s) occurred over a period of time.	
Transaction Date	
<input checked="" type="checkbox"/> Check this box if the suspicious transaction(s) occurred over a period of time.	
Start Date	End Date

If the amount involved is unknown for either type of transactions, click the respective "Unknown" checkboxes.

The maximum no. of transactions that can be added is 40 transactions. If there are more than 40 transactions, provide **ALL** the transactions in a .csv file. The .csv file for the transaction information should contain the same fields as the Suspicious Transaction(s) section.

You are able to select which account the transaction relates to.

When the suspicious transaction(s) occurred on a specific date, the "transaction date" should be the value date of the transaction(s).

For transactions that occurred over a period of time, select "Check this box if the suspicious transaction(s) occurred over a period of time." "Transaction date" will change to "Start Date" and "End Date" will be populated.

Note:

- Provide transaction details **over the review period, or at least over a three month period that covers the suspicious transaction(s), whichever is the longer period.**

# TAB – SUSPICIOUS TRANSACTIONS

Part V Suspicious Transaction(s)	
<b>Suspicious Transaction(s)</b>	Enter details of any suspicious transactions noted by the reporting institution. You may also wish to upload the transaction details as a Comma Separated Values (.csv) file.
Total Amount Involved (Actual Transactions)*	<input type="text"/> <input type="checkbox"/> Unknown
Total Amount Involved (Attempted/Rejected Transactions)*	<input type="text"/> <input type="checkbox"/> Unknown
<b>Transaction</b> <input type="button" value="+"/> <input type="button" value="-"/>	Please Indicate <input checked="" type="radio"/> Actual <input type="radio"/> Attempted/Rejected
Select the Account Number for which this transaction relates to	
<input type="text" value="1234567890"/>	
Type of Transaction	
<input type="text" value="Virtual Assets"/>	
Virtual Asset Transaction*	<input type="radio"/> Deposit <input type="radio"/> Withdrawal
Name of Virtual Asset*	Amount in Virtual Asset*
<input type="text" value="NFT"/>	<input type="text"/>
If NFT: <input type="text"/>	
Name of Virtual Asset*	Amount in Virtual Asset*
<input type="text" value="Others"/>	<input type="text"/>
If Others: <input type="text"/>	

For the type of transaction “Virtual Assets”, select whether the virtual asset transaction involves a deposit or withdrawal from the account.

Select the name of the Virtual Asset involved in the transaction from the dropdown list. If the Virtual Asset involved is an NFT, select “NFT” and fill in the name of the NFT in the “If NFT” free-text field. If the Virtual Asset involved is not in the dropdown list, select “Others” and fill in the name of the Virtual Asset in the “If Others” free-text field.

# TAB – SUSPICIOUS TRANSACTIONS

Part V Suspicious Transaction(s)	
<b>Suspicious Transaction(s)</b>	Enter details of any suspicious transactions noted by the reporting institution. You may also wish to upload the transaction details as a Comma Separated Values (.csv) file.
Total Amount Involved (Actual Transactions)*	<input type="text"/> <input type="checkbox"/> Unknown
Total Amount Involved (Attempted/Rejected Transactions)*	<input type="text"/> <input type="checkbox"/> Unknown
<b>Transaction</b> <input type="button" value="+"/> <input type="button" value="-"/>	Please Indicate <input checked="" type="radio"/> Actual <input type="radio"/> Attempted/Rejected
Select the Account Number for which this transaction relates to	
<input type="text" value="1234567890"/>	
Type of Transaction	
<input type="text" value="Virtual Assets"/>	
Virtual Asset Transaction*	<input type="radio"/> Deposit <input type="radio"/> Withdrawal
Name of Virtual Asset*	Amount in Virtual Asset*
<input type="text" value="Others"/>	<input type="text"/>
If Others: <input type="text"/>	
Amount in Fiat Currency	<input type="text"/>
<input type="text"/>	
Transaction Date	
<input type="text"/>	
Transaction Hash*	<input type="checkbox"/> Unknown
<input type="text"/>	
Sender Wallet Address*	<input type="checkbox"/> N/A
<input type="text"/>	
Receiver Wallet Address*	<input type="checkbox"/> Unknown
<input type="text"/>	
Country/Region of Source	Country/Region of Destination
<input type="text"/>	<input type="text"/>
Name of Counterparty Virtual Asset Service Provider*	<input type="checkbox"/> N/A
<input type="text"/>	
Counterparty Name	Counterparty Identification/Registration Number
<input type="text"/>	<input type="text"/>

For Virtual Asset Transactions, there will be no option to accumulate transactions over a period of time. If there are multiple Virtual Asset Transactions, enter each transaction as an additional suspicious transaction.

# TAB – Reasons for Suspicion

Part VI Reasons for Suspicion		
<p><b>Possible Type of Crime</b></p> <p>Select the most applicable type(s) of crime from the options provided below. You may select more than 1 option. This section is mandatory. If there is no discernable type of crime in this STR, please select "Not Established/Unknown".</p>		
<input type="checkbox"/> <b>Terrorism and Threats to National Security</b> <input type="checkbox"/> Illicit Arms Trafficking <input type="checkbox"/> Known or Suspected terrorist/terrorist organisation <input type="checkbox"/> Terrorism-financing <input type="checkbox"/> Terrorism-related sanctions <input type="checkbox"/> Transfer/brokering of strategic goods <input type="checkbox"/> Proliferation-financing and related <input type="checkbox"/> Proliferation-related sanction	<input type="checkbox"/> <b>Money Laundering</b> <input type="radio"/> Legal Entity <input type="radio"/> Natural Person <input type="radio"/> Self-Laundering <input type="radio"/> Third Party Laundering <input type="checkbox"/> ML involving fraudulent wire transfer <input type="checkbox"/> ML involving fraudulent trade documents	<input type="checkbox"/> <b>Robbery, Theft and other serious violent crimes</b> <input type="checkbox"/> Kidnapping, Illegal Restraint and Hostage Taking <input type="checkbox"/> Maritime Piracy <input type="checkbox"/> Murder and Grievous Bodily Injury <input type="checkbox"/> Theft <input type="checkbox"/> Extortion and other Serious Violent Crimes
<input type="checkbox"/> <b>Tax Crimes and Smuggling</b> <input type="checkbox"/> Domestic Tax Evasion <input type="checkbox"/> Foreign Tax Evasion <input type="checkbox"/> Tax Amnesty <input type="checkbox"/> Customs/Excise duties evasion <input type="checkbox"/> GST/VAT evasion <input type="checkbox"/> Illicit Trafficking in Stolen and Other Goods <input type="checkbox"/> Income Tax Evasion <input type="checkbox"/> Other types of tax evasion	<input type="checkbox"/> <b>Organised Crime and Racketeering</b> <input type="checkbox"/> Illegal Gambling and Remote Gambling related <input type="checkbox"/> Syndicated/Organised Crime <input type="checkbox"/> Unlicensed Money Lending <input type="checkbox"/> <b>Securities-related Offences</b> <input type="checkbox"/> False or Misleading Statements <input type="checkbox"/> Insider Trading <input type="checkbox"/> Market Manipulation/Rigging <input type="checkbox"/> Regulatory Offences <input type="checkbox"/> Unauthorised Share Trading	<input type="checkbox"/> <b>AML / CFT / Other Offences relating to</b> <input type="checkbox"/> Accountants Act 2004 <input type="checkbox"/> Accounting and Corporate Regulatory Authority Act 2004 <input type="checkbox"/> Banking Act 1970 <input type="checkbox"/> Business Names Registration Act 2014 <input type="checkbox"/> Casino Control Act 2006 <input type="checkbox"/> CDSA 1992 (for matters relating to Cash Movement Reports) <input type="checkbox"/> CDSA 1992 (for matters relating to failure to file STR) <input type="checkbox"/> Charities Act 1994 <input type="checkbox"/> Companies Act 1967 <input type="checkbox"/> Computer Misuse Act 1993 <input type="checkbox"/> Estate Agents Act 2010 <input type="checkbox"/> Finance Companies Act 1967 <input type="checkbox"/> Financial Advisers Act 2001 <input type="checkbox"/> Insolvency, Restructuring and Dissolution Act 2018 <input type="checkbox"/> Insurance Act 1966 <input type="checkbox"/> Legal Profession Act 1966 <input type="checkbox"/> Monetary Authority of Singapore Act 1970 <input type="checkbox"/> Moneylenders Act 2008 <input type="checkbox"/> Pawnbrokers Act 2015 <input type="checkbox"/> Payment Services Act 2019 <input type="checkbox"/> Precious Stones and Precious Metals (Prevention of Money Laundering, Terrorism Financing and Proliferation Financing) Act 2019 <input type="checkbox"/> Securities and Futures Act 2001 <input type="checkbox"/> Trust Companies Act 2005
<input type="checkbox"/> <b>Fraud / Cheating</b> <input type="checkbox"/> Public/Company funds in official capacity <input type="checkbox"/> Non-public/company funds <input type="checkbox"/> Counterfeit financial instruments <input type="checkbox"/> Credit/Debit/ATM card fraud <input type="checkbox"/> Criminal Breach of Trust/ Embezzlement <input type="checkbox"/> Falsification of Accounts <input type="checkbox"/> Fictitious Invoice Financing <input type="checkbox"/> Forgery/Fraudulent Documents <input type="checkbox"/> Internal Bank Fraud <input type="checkbox"/> Internet/E-commerce Fraud <input type="checkbox"/> Investment Fraud (including Ponzi Scams) <input type="checkbox"/> Loan Fraud <input type="checkbox"/> MLM/Pyramid Selling <input type="checkbox"/> Phone Scam <input type="checkbox"/> Wire Transfer Fraud <input type="checkbox"/> Other Fraud/Cheating	<input type="checkbox"/> <b>Environmental Crime</b> <input type="checkbox"/> Import/Export of Endangered Species without permit <input type="checkbox"/> Import/Export of Hazardous Waste without permit <input type="checkbox"/> False Statements relating to Hazardous Waste <input type="checkbox"/> Import/Export of Radioactive Materials <input type="checkbox"/> Disposal/Accumulation of Radioactive Waste <input type="checkbox"/> Import of Wild Animals and Birds <input type="checkbox"/> Import/Storage/etc. of hazardous substances <input type="checkbox"/> Illegal Harvesting or Trafficking of Wild Fauna and Flora <input type="checkbox"/> Illegal Logging/Land Clearing	<input type="checkbox"/> <b>Counterfeiting and Piracy of Products</b> <input type="checkbox"/> Counterfeit Currency <input type="checkbox"/> Offences under Medicines Act 1975 <input type="checkbox"/> Trademark/Copyright infringement <input type="checkbox"/> <b>Bribery / Corruption-related</b> <input type="checkbox"/> <b>Drugs-related Offences</b> <input type="checkbox"/> Import/Export of a controlled drug <input type="checkbox"/> Manufacture/Cultivation of a controlled drug <input type="checkbox"/> Trafficking of a controlled drug
<input type="checkbox"/> <b>Trafficking of Humans, Smuggling of Migrants, Sexual exploitation including exploitation of children</b> <input type="checkbox"/> Immigration-related Offences <input type="checkbox"/> Vice		<input type="checkbox"/> <b>Other possible offences</b> <input type="checkbox"/> Dealing with Obscene Materials <input type="checkbox"/> Illegal Dealing of Prohibited Items <input type="checkbox"/> Other Sanctions <input type="checkbox"/> Possible Offences related to crowdfunding <input type="checkbox"/> <b>Not Established / Unknown</b>

Select at least 1 Possible <Type of Crime> related to the STR. You may either select a **header** or a more detailed option. You may select more than 1 option.

In most instances, you should be able to identify possible Type(s) of Crime based on the suspicious indicators which prompted you to file a STR. Hence, you should **NOT** be selecting "Not Established/Unknown" **except only for a few cases.**



# TAB – Reasons for Suspicion

## Categories of Suspicion

Select the applicable categories of suspicion that describes the reported suspicious transaction(s).  
You may select more than 1 option. This section is mandatory.

### Anomalies noted during Customer / Supplier Due Diligence

- ☐ a. Entity was uncontactable for long period(s) (more than 2 months)
- ☐ b. Entity was unable/unwilling to provide information/documentation
- ☐ c. Questionable or false information/document was/were provided during onboarding
- ☐ d. Unable to determine relationship between entity and transacting party/parties
- ☐ e. Financial activity inconsistent with known profile of entity
- ☐ f. Purchase of insurance/investment products inconsistent with known profile of entity
- ☐ g. Multiple accounts/policies opened under a single entity
- ☐ h. Sudden change in account activity
- ☐ i. Unable to determine source of wealth
- ☐ j. Personal account used for business purposes
- ☐ k. Business account used for personal purposes
- ☐ l. Unusual interest in reporting institution's AML/CFT policies
- ☐ m. Unusual interest in refund policies
- ☐ n. Origins of precious stones, precious metals or precious product appears to be fictitious
- ☐ o. Rough diamonds are not accompanied by a valid Kimberley Process (KP) certificate
- ☐ p. Entity(s) featured in adverse news/Transactions with entity(s) featured in adverse news
- ☐ q. Entity(s) participating in Tax Amnesty

### Fund Movement

- ☐ a. Unusual/Uneconomic movement of funds
  - ☐ i. Domestic movement of funds
  - ☐ ii. International receipt of funds from high-risk jurisdictions/sanctioned countries
  - ☐ iii. International outward transfer of funds to high-risk jurisdictions/sanctioned countries
  - ☐ iv. Funds transferred from multiple entities into the account of a single entity
  - ☐ v. Funds transferred from a single entity into the accounts of multiple entities
- ☐ b. Frequent deposits which are promptly withdrawn in cash
- ☐ c. Funds received are immediately transferred out/withdrawn
- ☐ d. Funds transferred from businesses into individual's account(s)
- ☐ e. Funds transferred from money changers/remittance companies into individual's account(s)
- ☐ f. Incomplete remittance information in wire transfers

Select at least 1 <Categories of Suspicion> that describes the suspicious transaction(s) in this STR.  
You do not have to reiterate the same description in the <Reason(s) for Suspicion> if they have already been selected here.

### Structuring/Layering of Transactions

- ☐ a. Segregating a large transaction into a number of smaller transactions
- ☐ b. Transactions using separate entities to conceal the source of funds/order of transactions
  - ☐ i. Transactions with offshore companies
  - ☐ ii. Entity conducting transaction(s) on behalf of third party/s
  - ☐ iii. Unable to establish relationship between third party/s and entity
  - ☐ iv. Unable to establish reason for/purpose of third party payment
- ☐ c. Unable to determine source of funds
- ☐ d. Multiple transactions below reporting requirements
- ☐ e. Refining – Exchanging coinage or small denomination notes for larger denominations
- ☐ f. Large cash transactions (please indicate original currency)
  - ☐ i. Local Currency (SGD)
  - ☐ ii. Foreign Currency (please select)

### Transactions with no apparent business/lawful purpose

- ☐ a. Dubious/Uneconomical transactions
  - ☐ i. Frequent redemptions and short holding period of investments
  - ☐ ii. Minimal investments with large/frequent transactions
  - ☐ iii. Customer is not concerned with exchange rates, the value and/or specifications of the purchase/investment
  - ☐ iv. Frequent/repeated transactions with no apparent purpose
- ☐ b. Unusual use of credit/debit/ATM cards
  - ☐ i. Multiple cash card refunds into a single account
- ☐ c. Questionable Financial Instruments (Counterfeit Currency, Chips, Tokens, etc)

# TAB – Reasons for Suspicion

**Categories of Suspicion**

Select the applicable categories of suspicion that describes the reported suspicious transaction(s).  
You may select more than 1 option. This section is mandatory.

**Casino-Related Suspicious Indicators**

- ☐ a. Unusual Transfer of Funds

☐ i. Funds deposited from multiple entities into a single patron's account

☐ ii. Funds transfers to/from company accounts

☐ iii. Transactions conducted on behalf of other patrons

☐ iv. Unusual use of credit/debit/ATM cards

☐ v. Rejected/Reversed Transactions
- ☐ b. Unusual use of Gaming Instruments

☐ i. Passing of Physical Currency

☐ ii. Passing of Chips

☐ iii. Non-premium/Non-program members gaming with premium/program chips

☐ iv. Unusual use of gaming machines

☐ v. Unusual use of entertainment vouchers

☐ vi. Unusual use of Casino Products and/or Casino Marketing Programmes
- ☐ c. Unusual Behaviour

☐ i. Unknown source of funds/cash out chips

☐ ii. Unusual behaviour involving casino staff

☐ iii. Gaming activities inconsistent with known profile of entities

☐ iv. Cash-ins, Cash-outs and win/loss do not tally

Cash-in

Cash-out

Gaming

☐ Large

☐ Large

☐ Regular

☐ Minimal

☐ Minimal

☐ Minimal

☐ No cash-in

☐ No cash-out

☐ No Gaming
- ☐ v. Frequent entries to High Limit Gaming Area (HLGA) but with minimal or no gaming

☐ d. Suspected Undesirable Betting

☐ i. Verbal Betting

☐ ii. Contra Betting (offsetting bets)

☐ iii. Phone Betting

☐ iv. Insurance Betting

☐ v. Fluctuations in average bets

☐ vi. Side betting

☐ vii Recording gaming details during bet


☐ e. Junket/Casino Affiliation

This section will appear when the Institution Type selected in the Reporting Institution tab is “Casino Operator”.

# TAB – Reasons for Suspicion

Reasons for Suspicion No. of Characters (Max): 10,000

Date of Detection\* (DD/MM/YYYY)

Attachment(s) (Only .csv files 35MB or below are allowed; please restrict file name to below 90 characters and file name cannot contain the symbols ? \* < > : | & \ / [ ] " ' ) 



Select File

List of other supporting documents available



Complete all structured fields in the STR Form to the fullest extent possible. STRO has increased the character limit in the <Reason(s) for Suspicion> free-text field to 10,000 to allow reporting institutions to provide a more comprehensive basis of filing the STR. However, please note that the free-text field <Reason(s) for Suspicion> should only be used to provide information to substantiate the STR **not captured by the structured fields**.

Note:

- Do NOT mention the name of your company or yourself in this field.
- There is no need to repeat information/details provided in earlier sections of the STR). E.g. It is sufficient to just mention the entity name as particulars of the entity should be entered in Part III <Entity Profile>.
- Do not repeat the list of suspicious indicators under <Reason(s) for Suspicion>. Check the appropriate <Categories of Suspicion> option, unless it is not applicable.
- If you cite research/independent checks done on the entities or its counterparties, provide the source of the information e.g. website link.
- **Do NOT provide STR forms with a .csv attachment for the <Reason(s) for Suspicion>.**

Date of detection is the date in which the reporting institution assesses that an STR should be filed on the suspicious transaction(s). This may differ from the date of the actual suspicious transaction(s). STRs should be filed as soon as reasonably practicable.

- Maximum size of all files attached has been increased from 2MB to **35MB**.
- File name must not contain the symbols ? \* < > : | & \ / [ ] " ' "
- Only files in **.csv** format can be attached.
- File name must not exceed **90 characters** (this includes the extension ".csv").

Indicate other supporting documents you have but cannot be attached in .csv format. You need not provide them, unless STRO requests for them e.g.

- Commercial database screening results
- Image of Identification documents
- Image of source documents e.g. account opening forms, copy of identification documents, counterfoil of cheques, wire transfer application and advice, remittance advice
- Network map of entities and transactions

You should keep a copy of the files listed, so that you can provide them promptly to STRO when STRO contacts you.

## FILING A FOLLOW-UP STR

## When?

- You have made **any erroneous data entry** in the submitted STR form; and/or
- You have **updates or new information** pertaining to suspicious transaction(s), account(s) or entity(s) involved in a previously filed STR.

## How?

Reasons for Suspicion No. of Characters (Max): 10,000

This is an **amendment** to STR No. xxxxxx-xx-xx <Reference number of previously filed STR>

The <First name> field and <Middle Name> field of Entity 1 are amended.

<previous reasons for suspicion>

[illegible]

XX

Reasons for Suspicion No. of Characters (Max): 10,000

This is an **update** to STR No. xxxxxx-xx-xx <Reference number of previously filed STR>

The account status of Account No. <Account number xxxx> and Account No. <Account number xxxx> are updated. Transactions since the previous STR was filed is attached.

<previous reasons for suspicion>

[illegible][illegible]

Note: The same information in the fields of the first/ preceding STR should be provided, with amendments/ updates made to the relevant fields. This is for the IT system to link up the two STRs.

If you are filing multiple follow-up STRs on the same entity, provide the reference number of the immediate preceding STR. For e.g. If you are filing a third follow-up STR, you should make reference to the second follow-up STR.

You may wish to save a copy of the previous STR so that it is easier to update the information and then submit the follow-up STR Form.

## Scenario 1: Entity name misspelt

Provide reference number of previous STR.

Indicate which part of the STR form was updated.

## Scenario 2: Accounts closed after filing the previous STR

Provide reference number of previous STR.

Indicate which part of the STR form was updated.

Note: Indicate that the account is closed under the account information tab. This will change the fields that you have to complete for this section.

# SONAR USER GUIDE

For more information on the following functions of SONAR:

General Information on SONAR User Rights

Apply for Administrator User Right

Create Non-Administrator Users

Search, Edit and Delete Users

Submit Suspicious Transaction Reports

Search Submitted Reports

View Bulletins and Alerts

SONAR Technical Requirements

Refer to the SONAR User Guide at <https://www.police.gov.sg/e-services/report/stro-online-notices-and-reporting-platform/what-you-need>

# GETTING STARTED WITH SONAR

For STR filers  
(Updated on 1 July 2024)