

GEIB REFINING CORP.
399 KILVERT STREET
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(401) 732-2841 Fax
www.geibrefining.com

Form Type: **Corporate**

Date: __ / __ / ____

U.S.A. Patriot Act / AML Program Form

General Information

Name: _____

Address1: _____

Address2: _____

City: _____ State: _____

Zip Code: _____ Country: _____

Telephone: _____

Fax: _____

E-Mail: _____

Website Address: http:\\ _____

Previous Address: _____
(if moved in last 5 years)

Parent Company *(skip if N/A)*

Name of parent company: _____

City: _____ State: _____

Country: _____

1. Does your company import or export goods to/from the US? _____

2. Does your company have an Anti-Money Laundering program? _____

If YES, name of Compliance Officer _____

Company Information

Proprietorship LLC Corporation

Year established: _____ State: _____ State Resale Tax ID: _____

Federal ID: _____ (provide copy)

Key Officers: _____, _____

Type of Business: _____

Bank Information

Bank Name: _____

Address: _____

City: _____ State: _____ Country: _____

Telephone #: _____

Account #: _____

Bank Contact: _____

Trade Associations

(Please list association memberships)

1. _____

2. _____

3. _____

4. _____

The USA Patriot Act prescribes regulations that establishes minimum standards of identification and verification of customers in connection with the acceptance of refining material. These regulations require manufacturers, refiners, wholesalers, retailers, and any other entity engaged in the business of purchasing and selling precious metals, precious stones or jewelry to obtain certain information such as name, physical address and identification numbers.

Please fax directly back to 401-732-2841