

RESORTS WORLD™ SENTOSA

# Supplier Guide for Qualified Supplier Registration

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Oct 2024





## Content Page

1. Vendor Master Creation Form



# Vendor Master Creation Form (VMCF)

1 Supplier will receive the VMCF form via email from RWS Representative.

2 Fill in the form accordingly. There are 3 sections namely Company Profile, Bank Information and Declaration.

3 After completion, send the soft copy form to the RWS Representative.

This page must be printed and signed on Vendor's letterhead

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**Vendor Master Creation and Maintenance Form**  
 This form is used for the creation and maintenance of vendors for Resorts World Sentosa Pte Ltd and its affiliates ("RWS"). Please attach a copy of ACRA business profile / certificate of incorporation, relevant identification documents and any other supporting documents when submitting this form. Please ensure that this form is completed and signed by a Director of the Vendor or a person holding a position of Chief Financial Officer, Chief Executive Officer or a senior managerial position in the Vendor.

**A – Company Profile**

**General Information**

Name (As per ACRA business profile / Certificate of Incorporation/Identification Card / Passport):

Identification No. (Registration no. issued by any governmental authority certifying the incorporation or existence of the company/business/individual):  Country of Registration (As indicated please indicate the incorporation or existence of the company/business/individual):

Registration Date (DD/MM/YYYY):  Business Type:

ACRA Network ID:  ACCOUNT TYPE:  (Individual Account / Enterprise Account / Debit where applicable)

Principal/Registered Activities (To fill in full according to ACRA business profile or Certificate of Incorporation):

Registered Address:  Country:  Postal Code:

Business Address:  Country:  Postal Code:

**Commercial Terms**

Currency Code (refer to ACRA website website website):  Term of Payment (Refer to RWS docs website website website):  Trade Term (Refer to RWS docs website website website):

**Contact Information**

Contact Person:  Title:

Telephone No.:  Fax No.:

Contact Email Address (For receipt of information on RWS):

**Related Companies:**

Indicate "Yes" if Vendor does not have related companies. For definition of related companies, refer to Companies Act. \*Companies are deemed to be related to each other where a corporation (a) is the holding company of another corporation, or (b) is a subsidiary of another corporation, or (c) is a subsidiary of the holding company of another corporation. "Y"  "N"

Y/N	Full Name of Entity	Name	Registration No.	Country of Registration
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

Authorized Signature(s) of Vendor:

Name:  Designation:  Date:  Company Stamp:

This form is required to be sent to RWS Procurement for verification. For any changes in the Vendor's details (including related companies), please inform RWS Procurement immediately. (VMCF-Online-Vendor A)

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**B – Bank Information**  
 Existing Vendor (Vendor requests / reasons for change of payee bank account)

**Contact Details**

Name (As per ACRA business profile / Certificate of Incorporation/Identification Card / Passport):

Identification No. (Registration no. issued by any governmental authority certifying the incorporation or existence of the company/business/individual):  GST Registration No. (if applicable):

Name & Identification Number of Authorized Contact Person:  Contact No. of Authorized Contact Person:

Contact Email of Authorized Contact Person:

**Bank Details**

Beneficiary/Payee Name (For payment to beneficiary, please furnish a copy of NRIC or passport):

Bank Name:  Bank Address:

ACCOUNT NUMBER (or IBAN when required):  Bank Code:  Branch Code:

SWIFT Code/Field/any other info needed based on the country requirement:

**Intermediary bank details**

Name:  Address:

SWIFT Code/Field/any other info needed based on the country requirement:

**\*If Beneficiary/Payee Name is not the same as the Vendor Name, please provide relevant supporting documents and let us know if the payee is (please tick):**

Factoring Institutions (attach original authorization letter from the Vendor)  
 Holding Company (attach original authorization letter from the Vendor)  
 Sole Proprietor (attach Vendor's ACRA business profile)  
 Others, please state (attach a certified true copy of the company's board resolution from the Vendor)

I, the undersigned, hereby certify to the best of my knowledge that the particulars given in this form are true and correct. I also certify that I am authorized by the Vendor to complete and sign this form. I, on behalf of the Vendor, authorize RWS to make direct enquiries and references to any person, firm, public official or organization to verify the information submitted herein and regarding the competence and general reputation of the Vendor.

I understand that RWS reserves the sole right and discretion to select the applicants for award / contracting consideration. RWS reserves its right to terminate all signed contracts or Purchase Orders issued immediately and to pursue or recover all related damages incurred on a full indemnity basis if the information submitted above is found to be inaccurate.

Authorized Signature(s) of Vendor:

Name:  Designation:  Date:  Company Stamp:

**Fair RWS Use:**

Withholding Tax Applicable (For Non-Singapore Tax Resident Only)?

Yes/No:  If Yes, Withholding Tax No.:  (Specify with Reason Tax if applicable)

Reviewed By (Name, Dept, Stamp):  (SIGNED: Tax)

Vendor ID:

Reviewed By (Name, Date):  (Date & Stamp)

**Fair RWS AP if issued:**

Approved Fair RWS Input By (Name, Date):  (Date & Stamp)

Created/Updated By (Name, Date):

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**C – Declaration Form**

Name (As per ACRA business profile / Certificate of Incorporation / Identification Card / Passport):

Identification No. (Registration no. issued by any governmental authority certifying the incorporation or existence of the company/business/individual):  Country of Registration:

1. If the Vendor is a registered business, please provide:  Yes  No

(i) The country where it is registered, unique entity number/business registration number and supporting document (e.g. Quotation etc).

(ii) The description of the Vendor's Principal Activity and supporting document (e.g. Quotation etc).

If the Vendor is an individual, please provide:  Yes  No

(i) Citizenship, Identification number and supporting document (e.g. Passport etc).

(ii) Relevant qualification (e.g. Professional Certificate / Score etc).

2. Is the Vendor currently involved or has been involved in the last five years in any business arbitration/litigation or pending business arbitration/litigation relating to claims or disputes as:  Yes  No

(a) Defendant:

(b) The nature of the lawsuit is related/relevant to the type of goods/services that RWS intends to procure from vendor?  Yes  No  
 (If yes, please provide a brief description of the nature of the dispute, the amount under dispute and the parties involved and supporting document (e.g. Quotation etc).

3. Is the Vendor currently involved (whether as plaintiff or defendant) in any business arbitration/litigation or pending business arbitration/litigation relating to claims or disputes AND the value of claim exceeds 2% of the Vendor's Net Tangible Assets?  Yes  No  
 (If yes, please provide a brief description of the nature of the dispute, the amount under dispute and the parties involved and supporting document (e.g. Quotation etc).

4. Is the Vendor currently involved or has been involved in the last five years in winding up petition/bankruptcy?  Yes  No  
 (If yes, please provide details and supporting documents.

5. Are you related to anyone\* working in Resorts World Sentosa or companies related to the Gosting Group?  Yes  No  
 (If yes, please state Full Name of Related Person(s), Relationship, Name of Employer and Position. \* include spouse/ domestic partner, children (including foster and step-children), parents, parents-in-law, grandparents, siblings, cousins, nieces, nephews, aunts and uncles.

6. Have there been any adverse news (including but not limited to safety violations) about the Vendor or affiliates or its key managements or company directors or major shareholders in the last five years?  Yes  No  
 (If yes, please provide details and supporting documents.

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