CUSTOMER DUE DILIGENCE:

SOLE TRADER ~ UNINCORPORATED BODY ~ FIRM ~UNREGULATED ~

NAME OF CUSTOMER:						
ADDRESS:						
TEL:						
FAX:						
EMAIL:						
WEBSITE:						
NAME OF EACH PARTNER OWNING 25% OR MORE OF THE ENTITY:						
PARTNER:						
ADDRESS:						
OTHER PARTNER OWNING 25% OR MORE OF THE ENITITY:						
PARTNER:						
ADDRESS:						

OTHER PARTNER OWNING 25% OR MORE OF THE ENITITY:

PARTNER:			
ADDRESS:			
Have you or any Partne			
been convicted of Mone or Terrorist Financing		□ No	☐ Yes
If yes, please give detail	is:		
Have you or any Partne	er ever been		
declared bankrupt:		□ No	☐ Yes
If yes, please give detail	ls:		
Have you or any Partne	er ever been		
debarred from being a Director of any Company:		□ No	☐ Yes
	la.		
If yes, please give detail	is:		
Are you or is any Partn Exposed Person or an i	-		
member or close associ	ate of a Politically		
Exposed Person (If uns definition, please reque		□ No	☐ Yes
details):	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
If ves, please give detail	ls:		

Purpose of our Relationship:	To provide or arrange Corporate Services on behalf of Clients			
	Othe	r, please specify:		
	G			
Are you Licensed or regulated in Jurisdiction:	n any	□ No	☐ Yes	
If yes, please give details:				
I confirm that the above informa and correct to the best of my known		accompanying docu	umentation are true	
Signed:Sole Trader/Main Partn	er:	Date:		
Print Name:				
Dogumentation Needed				

Documentation Needed:

- Copy Passport & Utility Bill of Sole Trader or Partners owing 25% or more of the Business, certified by Solicitor, Auditor, Bank or 1. **Government Authority.**
- 2. Certified Copy of Trading Name Certificate, if any.
- Bank Reference in respect of Sole Trader or Trading Name. **3.**