

BIC KNOW YOUR CUSTOMER FORM – TO BE COMPLETED ANNUALLY 20__

FORM LAST COMPLETED IN (MM/YR)

FOR INDIVIDUALS

IDENTITY DETAILS

Title: Fore Name(s): Surname:

Date of Birth: National ID / Passport No.: Nationality:

ADDRESS AND CONTACT DETAILS

Postal Address:

Physical Address:

Village / Town / City: Country:

Duration of stay : if >2 years give previous Country of residence

Telephone: Mobile: Email Address:

For Proof of Address Please submit any of the following valid documents (Latest):

Telephone bill: Electricity bill: Water bill: Lease agreement:

BANKING DETAILS

Bank Name: Branch: Account Number:

Account Type:

FOR NON-INDIVIDUALS

IDENTITY DETAILS

CORPORATE ENTITY

Company Name: Registration No.:

Postal Address:

Physical Address:

Email Address:

Country of Incorporation: Website:

Brief description of business:

CONTACT PERSON

Title: Fore Name(s): Surname:

Date of Birth: National ID / Passport No.: Nationality:

Position:

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BANKING DETAILS

Bank Name:

Branch:

Account Number:

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DECLARATION OF BENEFICIAL OWNERSHIP

The Company hereby confirms and declares that as at the date hereof, the following individual(s) is/are the ultimate principal beneficial owner(s) of the Company through ownership in the intermediate or ultimate holding companies:

Full Name	Residential Address	Date of Birth	Nationality	Percentage of ownership (%)

ANTI-MONEY LAUNDERING AND COUNTER TERRORIST FINANCING REQUIREMENTS

In accordance with the Financial Intelligence Regulations the following documents should be provided for verification:

Natural Persons

- Identification document e.g. certified copy of I.D / passport

Company

- Certificate of incorporation
- Memorandum and articles of association
- Notice of registered office and postal address
- Identification documents of the person(s) managing the company
- Resolution specifying who is authorised to act on behalf of the company
- Identification document(s) of the person(s) authorised to act on behalf of the company

Partnerships

- Partnership agreement
- Identification documents of the natural persons who are partners e.g. certified copy of I.D / passport
- Resolution specifying who is authorised to act on behalf of the partnership
- Identification document(s) of the person(s) authorised to act on behalf of the partnership

DECLARATION

I hereby declare that the details furnished above are true and correct for the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be liable for it.

Full Name:

Designation / Position:

Date _____ Place _____ Signature _____