Cayman Islands

Exempted Companies – Due Diligence and Compliance

Anti-Money Laundering and Anti-Terrorist Financing Legislations

Implications for New Incorporation

- The Cayman Islands Government introduced The Proceeds of Criminal Conduct Law in 1996 which is the primary anti-money laundering legislation that covers all businesses and individuals. The Money Laundering Regulations issued in 2000 place additional legal and administrative requirements on entities conducting relevant financial business. In 2001, the Guidance Notes on the Prevention and Detection of Money Laundering were first issued to provide practical guidelines that represent best practice for the development of responsible anti-money laundering procedures in line with international standards. The Guidance Notes was subsequently revised to cover detection of terrorist financing.
- Amongst other things, assisting others to obtain the benefit of criminal conduct or "knowing or suspecting that such person has been engaged in criminal conduct" or has benefited from such activities is a criminal offence. It is also an offence not to report knowledge or suspicion of money laundering.
- Vistra (Cayman) Limited as a Company Management Licence Holder in Cayman Islands, like other companies providing services in the Cayman Islands, are required under the legislations to ensure that we obtain certain background information from clients before we incorporate, sell or manage a Cayman Islands company and satisfy ourselves as best we are able that there is no criminal purpose connected to the company.
- As a result, before Vistra Licence Holdings (BVI) Limited and/or any of its affiliated companies, including Vistra (Cayman) Limited ("Vistra") will sell a Cayman Islands shelf company or incorporate a company in the Cayman Islands (or in the case of a transfer of registered office to Vistra, before the transfer in takes place), please complete the attached Compliance Control Schedule in full and return to our offices together with all of the supporting documents referred to in the Schedule.
- Thank you for your co-operation. Please do not hesitate to contact us if you have any questions.

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Exempted Companies – Due Diligence and Compliance

Notes for completion of the Compliance Control Schedule

- Please read these notes carefully as insufficient information will delay our sale of the required company to you, or the companies.
- Section 1 must be completed by all clients.
- If the Company Secretary, Directors, Shareholders and Beneficial Owners are all individuals you will only be required to complete Section 1.
- Directors' details, Shareholders' details and Beneficial Owners' details: We have provided space for three Directors, Shareholders and Beneficial Owners each. If you require more than three please copy the relevant page and amend the numbering of each to reflect the order you would require on the listing.
- Copies of passport / identity card / address proof are to be certified by a suitable certifier such as a lawyer, accountant or a banker from a regulated financial institution or the original must be submitted in person to Vistra for verification. The certifier must date and sign the copy document (printing his/her name underneath) and clearly indicate his/her position or capacity on it together with a contact address and phone number.
- Appendix A (Reference Letter) Sample of professional reference to be issued by a bank, accounting firm or law firm. Reference issued by an individual banker, lawyer or accountant are NOT accepted.
- Appendix B (Additional Information for each Corporate Body) -Complete for each Corporate Secretary, Corporate Director, Corporate Shareholder or Corporate Beneficial Owner.
- Appendix C (Exempted Client Declaration) Apply in the circumstances listed which exempt the entity from providing the information in Appendix B.
- Appendix D (Introduction by Professional Clients)

 Use by eligible introducers for each director, officer and shareholder who have performed and maintained full due diligence on their client, may be required to submit documentary evidence.

Cayman Islands Exempted Companies – Due Diligence and Compliance

Section 1 (to be completed by ALL clients)

1.1 Proposed Company Name / Shelf Company Name:		Compliance Use
1		
2		
3		
1.2 Authorised Capital: (Please ' 🖌 ' whichever applicable)		
Is the entity or any subsidiaries or the parent company listed on a stock exchange?		
US\$50,000.00 representing 50,000 Shares of US\$1.00 each (standard)		
US\$ representing Shares of US\$	each	
Please Note: additional capital duty is payable where capital is in excess of US\$51,200. Please sta currency if other than US\$.	ite type of	
1.3 Location of Registers, Minute Book and records, Common Sea	l, etc.	
a) Original Register of Directors and Officers AND Register of Mortgages and Charges shall be k Cayman Registered Office in accordance with the Companies Law (2009 Revision).	ept at the	
b) Original Registers of Members and Transfers may be kept at the Cayman Registered Office or inside or outside the Cayman Islands.	any place	
Do you want the Original Registers of Members and Transfers be kept at the Cayman Register	ed Office?	
Yes No (Please ' ' whichever applicable and specify address below)		
c) Please specify address of Minute Book and records and common seal:		
1.4 Source of fund of the Company		
(1.4a) Company's initial Source of Funds: [Please '		
Personal Assets of Beneficial owner(s)		
Borrowings/ Loans		
Public Listing		
Others (please specify):		

(1.4b) Company's ongoing Source of Funds/ Wealth: [Please '

✓ ' whichever applicable]

Business Income

Inter-Group Financing

Reinvestment of Business Income

Business Loan from Existing Activities

Others (please specify):

1.5 Business Activities:

(Please ' ' whichever applicable)

Investment holding [Please complete (1.5a)]

Holding of other Assets [Please complete (1.5b)]

Operating Business [Please complete (1.5c)]

Internet Related Activities [Please complete (1.5d)]

Dormant [Please complete (1.5e)]

Others [Please complete (1.5f)]

(1.5a) (i) Type of investments

(ii) Location of investments

(iii) Location of the stock market (for investment in public listed companies)

(1.5b) (i) Type of assets (e.g. property, debentures, yacht etc.)

(ii) Location of assets

(1.5c) (i) Type of products or services

(ii) From which countries is the company manufacturing, distributing, trade offering its products / services

(iii) In which countries are the Company's customers based

(iv) In which countries are the Company's suppliers based

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(v) Does the Company or its staff require a licence or a registration of some kind to conduct its business activities legally? If so, please provide details and copies of such current licences and registrations

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(1.5d) (i) Type of internet related activities (i.e. Online platform, Online technology solution provider, Cryptocurrency, Intending to issue ICO)

(ii) Nature of activities

(iii) In which countries are the Company's customers based

(1.5e) Please indicate why the Company is regarded as, or required to be dormant

(1.5f) Others (please specify)

1.6 Company Secretary's Details

Please note:

- 1) It is not a statutory requirement for a Cayman Islands company to have a Secretary under the Companies Law (2009 Revision).
- 2) If the Secretary is a corporate body, please complete Appendix B.

(a) Surname:

(b) Given Name(s):

(c) Residential Address:

(d) Nationality:

(e) Passport / ID No.:

(f) Occupation:



For each individual Company Secretary, Please submit:

- 1. A certified true copy of valid Passport or Government issued Identity Card* which bears a clear photo of the person; and
- 2. A reference letter (see Appendix A) issued by a bank, accounting firm or law firm residential address proof issued within last 3 months
- * Hong Kong Identity Card is not acceptable

1.7 Directors' Details:

Please note:

- 1) Cayman company may have only one director.
- 2) Our standard M&A provides that maximum number of directors is 12.
- 3) If the Director is a corporate body, please complete Appendix B.

(1.7a) Director 1:

(a) Surname:

(b) Given Name(s):

(c) Residential Address:

(d) Nationality:

(e) Passport / ID No.:

(f) Occupation:

(g) Date of Birth:

(1.7b) Director 2:

(a) Surname:

(b) Given Name(s):

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OR certified true copy of



(c) Residential Address:	Compliance Use
(d) Nationality:	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
(1.7c) Director 3:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
For each individual Director, Please submit:	
 A certified true copy of valid Passport or Government issued Identity Card* which bears a clear photo of the person; and 	
2. A reference letter (see Appendix A) issued by a bank, accounting firm or law firm <u>OR</u> certified true copy of residential address proof issued within last 3 months	
* Hong Kong Identity Card is not acceptable	

1.8 Shareholders' Details

Please note:

- 1) Cayman company may have only one shareholder.
- 2) If the Shareholder is a corporate body, please complete Appendix B.

(1.8a) Shareholder 1:

(a) Surname:

(b) Given Name(s):

(c) Residential Address:

(d) Nationality:

(e) Passport / ID No.:

(f) Occupation:

(g) Date of Birth:

(h) Number & Percentage of share(s) to be issued:

(i) Source of Wealth: [Please ' vhichever applicable]

Entrepreneurial Activity [please complete (A)]

Salary [please complete (B)]

Investments [please complete (C)]

Others [please complete (D)]

(A) (i) Company name (Please also provide company website if available)

(ii) Type of Business

Compliance Use



(B) (i) Name of last employer	Compliance Use
(ii) Position held and year of service with the employer mentioned in (B)(i)	
(C) (i) Type of investments	
(ii) Place of investments	
(D) (i) Please specify	
(1.8b) Shareholder 2:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
(b) Number 8 Descentage of charg(c) to be issued:	
(h) Number & Percentage of share(s) to be issued:	



(i) Source of Wealth: [Please ' vhichever applicable]

Entrepreneurial Activity [please complete (A)]

Salary [please complete (B)]

Investments [please complete (C)]

Others [please complete (D)]

(A) (i) Company name (Please also provide company website if available)

(ii) Type of Business

(B) (i) Name of last employer

(ii) Position held and year of service with the employer mentioned in (B)(i)

(C) (i) Type of investments

(ii) Place of investments

(D) (i) Please specify

(1.8c) Shareholder 3:

(a) Surname:

(b) Given Name(s):

(c) Residential Address:

(d) Nationality:

(e) Passport / ID No.:

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Compliance Use

(f) Occupation:	Compliance Use
(g) Date of Birth:	
(h) Number & Percentage of share(s) to be issued:	
(i) Source of Wealth: [Please ' ' whichever applicable]	
Entrepreneurial Activity [please complete (A)]	
 Investments [please complete (C)]	
Others [please complete (D)]	
(A) (i) Company name (Please also provide company website if available)	
(ii) Type of Business	
(B) (i) Name of last employer	
(ii) Position held and year of service with the employer mentioned in (B)(i)	
(C) (i) Type of investments	
(ii) Place of investments	
(D) (i) Please specify	
For each individual Shareholder, Please submit:	
 A certified true copy of valid Passport or Government issued Identity Card* which bears a clear photo of the person; and 	
 A reference letter (see Appendix A) issued by a bank, accounting firm or law firm OR certified true copy of residential address proof issued within last 3 months 	
* Hong Kong Identity Card is not acceptable	

1.9 Are the above shareholders beneficial owners of the company?	Compliance Use
(Please ' 🗹 ' whichever applicable)	
Yes [Please go to section 1.11]	
No [Please complete section 1.10 for the Beneficial Owner(s)]	
1.10 Beneficial Owner(s):	
Please note: For due diligence purposes, Beneficial Owner(s) are any natural persons (not a corporate) holding 10% interest or more or with principal control over the company's assets.	
(1.10a) Beneficial Owner 1:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
(h) Number & Percentage of share(s) to be issued:	
(i) Source of Wealth: [Please ' 🛛 ' whichever applicable]	
Entrepreneurial Activity [please complete (A)]	
Salary [please complete (B)]	
Investments [please complete (C)] Others [please complete (D)]	

(A) (i) Company name (Please also provide company website if available) **Compliance Use** (ii) Type of Business (B) (i) Name of last employer (ii) Position held and year of service with the employer mentioned in (B)(i) (C) (i) Type of investments (ii) Place of investments (D) (i) Please specify (1.10b) Beneficial Owner 2: (a) Surname: (b) Given Name(s): (c) Residential Address: (d) Nationality: (e) Passport / ID No.: (f) Occupation: (g) Date of Birth:



(h) Number & Percentage of share(s) to be issued:

	Compliance Use
(i) Source of Wealth: [Please ' ' whichever applicable]	
Entrepreneurial Activity [please complete (A)]	
Salary [please complete (B)]	
Investments [please complete (C)]	
Others [please complete (D)]	
(A) (i) Company name (Please also provide company website if available)	
(ii) Type of Business	
(B) (i) Name of last employer	
(ii) Position held and year of service with the employer mentioned in (B)(i)	
(C) (i) Type of investments	
(ii) Place of investments	
(D) (i) Please specify	
(1.10c) Beneficial Owner 3:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	



(e) Passport / ID No.:	Compliance Use
(f) Occupation:	
(f) Occupation:	
(g) Date of Birth:	
(h) Number & Percentage of share(s) to be issued:	
(i) Source of Wealth: [Please ' ' whichever applicable]	
Salary [please complete (B)]	
Investments [please complete (C)] Others [please complete (D)]	
(A) (i) Company name (Please also provide company website if available)	
(ii) Type of Business	
(B) (i) Name of last employer	
(ii) Position held and year of service with the employer mentioned in (B)(i)	
(C) (i) Type of investments	
(ii) Place of investments	
(D) (i) Please specify	
For each individual Beneficial Owner, Please submit:	
 A certified true copy of valid Passport or Government issued Identity Card* which bears a clear photo of the person; and 	
2. A reference letter (see Appendix A) issued by a bank, accounting firm or law firm <u>OR</u> certified true copy of residential address proof issued within last 3 months	
* Hong Kong Identity Card is not acceptable	

1.11 Tax Transparency

Please indicate responses to the following:

(a) In which country will the management and control of the Company's business be based?

(b) In which country will the business contracts be exercised?

(c) Has tax advice been obtained, or will tax advice be obtained for the structure?

Yes No

(d) What is the tax position of the Company?

(e) Who is the tax advisor?

1.12 Declaration

I/We confirm that:

- 1 The directors, shareholders and beneficial owners of the company have not been declared bankrupt or insolvent or concerned in the management of any company which has been/is subject to an insolvent liquidation or bankruptcy in any part of the world (please provide details if this is not accurate);
- 2 Any assets I/we may transfer either now or in the future to the company are and will be beneficially owned by me/us, free from any liens, charges and encumbrances and that such assets do not and will not represent the proceeds of or derive from any criminal or illegal activities including tax fraud or evasion; and
- 3 In accordance with section 59 of the Cayman Islands Company Law (2009 Revision) we will cause proper books of account to be kept for the proposed company.
- 4 The above information, to the best of my/our knowledge and belief, is true, correct, complete and accurate, and Vistra is authorised to supply any or all of such information for due diligence purposes to any applicable Regulator(s) if so requested by them and that I/we are authorised (and where so needed obtained the required consents) to provide the above information to Vistra.
- 5 I/We understand the legal and tax reporting requirements and other responsibilities in my/our country of residence and / or other applicable jurisdictions and will comply with all the relevant reporting requirements on my/ our own. I/ We understand that Vistra strongly suggests I/ we seek independent tax advice from a third party tax professional not associated with Vistra in respect of this structure if necessary.
- 6 I/We understand and agree that all documents supplied (including this form) will not be returned to me/us.
- 7 I/We also undertake to notify Vistra of any future changes to the above information.
- 8 I/We understand that Vistra reserves the right to request for additional documentation/information.

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- 9 I/We moreover understand and agree that the applicable KYC Terms & Conditions as can be reviewed here https://www.vistra.com/bvi/terms shall apply to services provision in connection herewith ("Services"), and that by submitting this form to Vistra I/we agree to the Terms & Conditions, provided that where any written service agreement, engagement letter or other agreement for provision of services is agreed between us or between Vistra and the relevant Vistra client to whom this form relates, or shall otherwise apply to the provision of the Services, any terms and conditions included therein shall take priority in regard to the Services in case of any conflict with the Terms & Conditions. In case of any conflict between any provision included in this form and the Terms & Conditions, the relevant provision included in this form shall prevail.
- 10 I/We, on behalf of myself/ourselves and anyone else whose data I/we provide to Vistra, explicitly agree and consent to the cross border transfer of any personal data and information provided to and collected by Vistra via this form, including the transfer of such data to other companies within Vistra's group and any third party entities that have agreed to confidentiality terms similar to those provided to clients of Vistra.
- 11 I/We acknowledge that I/we have read and understood Vistra's global privacy statement, data protection and data security policies ("Policies") as can be reviewed at https://www.vistra.com/notices and https:// www.vistra.com/privacy-notice, and that I/we have provided these Policies for review to anyone else whose data I/we provide to Vistra, and that they have also read and understood those Policies. I/we also acknowledge and agree that Vistra may change these Policies from time to time, and that it shall be my/ our responsibility to check any such updates from time to time and communicate such updates to anyone else whose data I/we provide to Vistra. I/We lastly hereby acknowledge, on behalf of myself/ourselves and anyone else whose data we provide to Vistra, to have read and agreed to the Policies.

1.13 Authorisation for filing Annual Return and List

I/We, being the client / proposed Director of the company, hereby confirm and authorise Vistra to file the Annual Return and Declaration of the company and I/we will undertake the responsibility to inform Vistra any amendments to the Memorandum and Articles of Association including but not limited to change of company name, change of authorised capital and any Articles of Association; and also any changes to the Registers of Directors, Officers, Members and Charges of the Company, until you are informed otherwise in writing.

Signature & Company Stamp:

(Client / Any One of the Proposed Directors)

Date:

Print Name:

Vistra reserves the right to request any further information, which it might require at any time in order to ensure the company, is fully compliant with all due diligence requirements, which may be imposed upon the company and/or Vistra. Any information provided to Vistra may be kept in Vistra's Confidential Files at its offices.

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Compliance Sign off by:

Name:



Appendix A : Reference Letter

[ON PROFESSIONAL FIRM'S LETTERHEAD]

[Date]

To: Compliance Officer Vistra (Cayman) Limited c/o Compliance Department, Vistra Licence Holdings (BVI) Limited

PROFESSIONAL REFERENCE AND PROOF OF ADDRESS

We hereby confirm that [Name of client(s)]* (the "Referral") is personally known to us and has been our client for a period of [no.]+ years.

We consider the Referral to be a business person of good standing. We know of no reason why the Referral should not be considered as a suitable client for your Company.

We further confirm that the Referral's residential address is:

[Address]

The Referral has also been advised to keep your office informed of any future relocation of their residence within 3 months from the relocation.

Should you have any queries in relation to this matter, please do not hesitate to contact the undersigned.

Yours faithfully,

For and on behalf of [Name of Bank / Accounting Firm / Law Firm]

Name of Signatory:

Job/Position Title:

Email:

Telephone:

Address:

* The name must be identical with the person's identity document.

+ Referee shall know the person not less than a year.

VISTRA reserves the right to request information to support the signor's capacity.

Cayman Islands Compliance Control Schedule – Exempted Companies

Appendix B : Additional Information for each Corporate Body

Please note:

- 1. This is to be completed in respect of each Corporate Director, Corporate Shareholder and Corporate Secretary.
- 2. If the Corporate Director / Shareholder / Secretary qualifies for an exemption from providing the information in Appendix B, you may complete only points B.1 to B.4 below together with Appendix C for exemption.
- 3. Please provide us Certified True Copies of the following documents of the corporate body:
 - a. Certificate of Incorporation or equivalent
 - b. Constitutional documents (i.e. Memorandum and Articles of Association/ By-Laws)
 - c. Register of Directors
 - d. Register of Members

Name of the Corporate Person:

(B.1) Position(s) Held in the Cayman Company:

- Director
- Secretary
- Shareholder:-

Number & Percentage of share(s) to be issued

(B.2) Address of the Registered Office:

(B.3) Nature of Business:

(B.4) Geographical location(s) of the business:

(B.5) Beneficial Owner(s) of the Corporate Person, holding a 10% interest or more or with principal control over the company's assets.

(B.5a) Beneficial Owner 1:

(a) Surname:

(b) Given Name(s):

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(c) Residential Address:	Compliance Use
(d) Nationality:	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
(h) Number & Percentage of share(s) to be issued:	
(i) Source of Wealth: [Please ' ' whichever applicable]	
Entrepreneurial Activity [please complete (A)]	
Salary [please complete (B)]	
Investments [please complete (C)]	
Others [please complete (D)]	
(A) (i) Company name (Please also provide company website if available)	
(ii) Type of Business	
(B) (i) Name of last employer	
(ii) Position held and year of service with the employer mentioned in (B)(i)	



(C) (i) Type of investments	Compliance Use
(ii) Place of investments	
(D) (i) Please specify	
(B.5b) Beneficial Owner 2:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	
(c) Perspect / ID No.	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
(h) Number & Percentage of share(s) to be issued:	
(i) Source of Wealth: [Please ' ' whichever applicable]	
Entrepreneurial Activity [please complete (A)]	
Salary [please complete (B)]	
Investments [please complete (C)]	
Others [please complete (D)]	

(A) (i) Company name (Please also provide company website if available)	Compliance Use
(ii) Type of Business	
(B) (i) Name of last employer	
(ii) Position held and year of service with the employer mentioned in (B)(i)	
(C) (i) Type of investments	
(ii) Place of investments	
(D) (i) Please specify	
For each individual Beneficial Owner, Please submit:	
1. A certified true copy of valid Passport or Government issued Identity Card* which bears a clear photo of the person; and	
 A reference letter (see Appendix A) issued by a bank, accounting firm or law firm OR certified true copy of residential address proof issued within last 3 months 	
*Hong Kong Identity Card is not acceptable	
(B.6) Identity of two directors; OR 1 director if the corporate body has only 1 director:	
(B.6a) Director 1:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	
(e) Passport / ID No.:	

(f) Occupation:	Compliance Use
(g) Date of Birth:	
(B.6b) Director 2:	
(a) Surname:	
(b) Given Name(s):	
(c) Residential Address:	
(d) Nationality:	
(e) Passport / ID No.:	
(f) Occupation:	
(g) Date of Birth:	
For each individual Director, Please submit:	
1. A certified true copy of valid Passport or Government issued Identity Card* which bears a clear photo of the person; and	
2. A reference letter (see Appendix A) issued by a bank, accounting firm or law firm OR certified true copy of residential address proof issued within last 3 months	
*Hong Kong Identity Card is not acceptable	



Cayman Islands Compliance Control Schedule

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Appendix C: Exempted Client Declaration

Name of exempted entity:

(a)		with regulation 5 of a		Laundering Regulatic	ons* or is a majority-owned	
Name ((if appl	of parent entity icable)					
(b)		jovernment organisat a low degree of risk o			government in a country financing :	
Jurisdia	ction					
(c)	an overseas regula formed under the	tory authority exercis	ses regulator isdiction dee	y functions and is ba emed to be low risk	usiness in relation to which sed or incorporated in, or for money laundering and	
Jurisdia	ction					
[] (d)		nts to ensure adequa			losure requirements which nership, or majority owned	
Name Stock E	of Exchange			Stock Code		
Name (if appl	of parent entity icable)					
(e)	a pension fund for entity referred to (a		ciation, trade	e union or is acting o	n behalf of employees of an	
Name entity	of referred					
Jurisdio	ction					
Stock E	Exchange					
Stock (Iode					
Signatu Compa (of exe	ure and any Stamp mpted entity)			Name (of signatory)		
Capaci	ty			Date		
Email				Telephone		
Addres	s					

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VISTRA reserves the right to request information that will support your exempt status.

*Anti-Money Laundering Regulations is available at https://www.cima.ky/laws-and-regulations

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Cayman Islands Compliance Control Schedule

Appendix D: Introduction by Professional Clients

Eligible Introducer's (Assurance) Form		Date		
Eligible Introducer ("EI") Information				
Name				
Email				
Telephone				
Address				
El's Regulator/ Profession	al Body			
Name				
Jurisdiction				
Address				
Information on Applicant	t of Business			
Name (in full)]	
Former name(s), trading	name(s)/ or any other name used where applicable			
Residential address for in	dividuals/ place of business or registered office address for legal person			

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Type of legal entity/ arrangement (for legal persons or arrangements)

Do	es the El consider the customer to be, or associated with, a Politically Exposed Person: Yes No	
We	hereby confirm that, with respect to the applicant for business, we have:	
(a)	We have identified and verified the identity of the applicant for business, and, where required, the beneficial owner of the applicant for business, under procedures maintained by the introducer in accordance with applicable laws;	
(b)	The nature and intended purpose of the business relationship is [provide details]	

- (c) We have identified the source of funds of the applicant for business;
- (d) We have measures in place, for compliance with customer due diligence and record keeping requirements; and
- (e) We shall make available on request and without delay copies of identification and verification data and any other relevant documentation relating to customer due diligence requirements in respect of the applicant for business and, the beneficial owner of the applicant for business. Client Documents will be provided on request without delay.

We hereby confirm that, we are acting in the course of a business or are a majority-owned subsidiary of the business in relation to which an overseas regulatory authority exercises regulatory functions and are based or incorporated in, or formed under the law of, a country/jurisdiction deemed to be low risk for money laundering and terrorist financing. Specify this country/jurisdiction as below.

Signature and Company Stamp

Name of Signatory

Email

Job/Position Title

Telephone

Address