**CORPORATE ENTITY (only)**

***KNOW YOUR CUSTOMER (KYC) In terms of the Financial Intelligence Act, 2022***

***Fill this form in English and BLOCK LETTERS.***

Company Name: ……………………………………………….. Registration No: .…………………………………

Postal Address: ……………………………………………………………………………………………………………….

Physical Address………………………………………………………………………………………………………………

Email Address: ………………………………………………………………………………………………………………..

Country of Incorporation: …………………………………………………………………………………………………

Website: ………………………………………………………………… Contact number………………………………

Brief Description of Business: ……………………………………………………………………………………………

…………………………………………………………………………………………………………….

**SERVICES REQUIRED**

**Estate Agency Property Management Valuations Auctions**

**BENEFICIAL OWNERSHIP (Contact Person)**

Title (Mr/Mrs/ Dr/ Prof/ Widow/Other…………………………….

Applicant First Name(s)……………………………………..Last Name……………………………………………….

ID/ Passport number…………………………………………..Date of Birth…………………………………………..

Email address ……………………………………………………………………………………………………………………

Postal address……………………………………………………………………………………………………………………

Residential Address …………………………………………………………………………………………………………..

Tel no: ………………………………….Fax No: ………………………………. Cell No: ………………………………

Nationality…………………………………Country of Origin…………………………………….

Marital Status ………………………….. First Name of spouse: ………………..………….

Last Name ……………………………… Maiden Name………………………………………….

Other…………………………………………………….……………………………………………………………………..…

**BANKING DETAILS** BANK 2 (if any)

Bank Name:……………………………………… ………………………………………………………..

Account Name…………………………………… .………………………………………………………..

Account Number:……………………………… …………………………………………………………

Branch Name: ………………………………… …………………………………………………………

**SOURCE OF FUNDS**

**Source of Funds ……………………………….**

**Purpose of Funds ……………………………...**

**Nature of Business…………………………….**

**Services Provided ……………………………..**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full Name | Residential Address | Date of Birth | Nationality | Ownership (%) |
|  |  |  |  |  |
|  |  |  |  |  |

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

***Checklist for documents to be submitted***

Certificate of incorporation

Identification document(s) of the person(s) authorised to act on behalf of the company e.g. certified copy of ID/Passport

Proof of Residential address of the person (less than 3 months old) 3 Months bank statement

Proof of Registered Office and Postal Address

**Partnerships**

Partnership agreement

Identification document(s) of the person(s) authorised to act on behalf of the partnership

Residential address of the person (less than 3 months old)

*TCs- Transactions may not be completed if the client does not furnish all the required information*

Designation/Position: ……………………………………………………………………..

Signed: …………………………………….

Date: ……………………………………….

***For office use only***

Date received………………………………………….

Signature ………………………………………………