CLIENT INFORMATION SHEET.(C.I.S)

Applicant Information:

Individual/Company Name
Mailing Address
City, Post Code, Country
Country where resident/registered
Company Registration Number
Telephone number
Facsimile number
E-mail Address
Date Company established
Type of business activity
Website

Individual Applicant or authorised Signatory Representative of Company:

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Individual Name
Title/Position/Authority
Telephone number
Facsimile Number
E-Mail Address
Passport Number
Country Issuing Passport
Date of Expiration

Primary Banking:

Bank name
Bank address
Bank account number
Bank Account name
IBAN
Bank officer name
Bank telephone number
Bank officer email address

Lawyer:

Name of lawyer
Address
City, Post Code, Country
Law Firm's telephone number
Lawyer's mobile phone number
Facsimile Number

COMPANY LETTERHEAD

Lawyer E-Mail Address	:
Contact Person:	
Name of Contact	:
Telephone number	:
Facsimile number	:
E-mail Address	:
Position	:
Nationality	:

Brief Description of Corporate activities:

Declaration:

I hereby swear under penalty of perjury, that the information provided is both true and accurate. I am the signatory on the aforementioned bank account. All monies engaged in this transaction are derived from non-criminal origin; and, are good, clean and cleared. The origin of funds is in compliance with Anti-Money-Laundering Policies as set forth by the Financial Action Task Force (FATF) 6/01.

I, (NAME), hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: DATE

For and on behalf of (COMPANY NAME)

Signature: Name / Title: Company: Passport Number: Date of Issue: Date of Expiry: Country of Issuance: SEAL OF COMPANY

COMPANY LETTERHEAD

Page | 3

ATTACH PASSPORT HERE

3

COMPANY LETTERHEAD

Page | 4

ATTACH CERTFICATE OF COMPANY CERTIFICATE HERE