

# KYC Request

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## Customer Details:

Name: \_\_\_\_\_

Company or Individual: \_\_\_\_\_

Registered Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type of Company: *e.g. jeweller, refiner, investor, manufacturer, miner*

\_\_\_\_\_

Description of Core Business Activity:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How many direct & indirect subsidiaries do you have?

\_\_\_\_\_

Please provide a group chart if relevant:

Main Markets: \_\_\_\_\_

Main Products: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**For individuals, please submit personal identity documents.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**For companies, please submit company registration or tax ID number documents.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Legality of Business: *e.g. Sole Trader, Limited Company*

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Date of Incorporation: \_\_\_\_\_

(Or date of birth if individual): \_\_\_\_\_

Country of Incorporation: \_\_\_\_\_

(or Nationality if individual) \_\_\_\_\_

VAT-number, Tax Identification or official Company Registration Number:

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Names of the Board of Directors:

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Does the company hold a licence to conduct business(es)?  Yes  No  
*If so, please provide a copy(ies).*

Is any member of senior management a politically exposed person (PEP)?

Yes  No

If so, please give details:

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## Beneficial Owners (1)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Country of Incorporation: \_\_\_\_\_

(or Nationality if Individual)

Date of Incorporation: \_\_\_\_\_

(or Date of Birth if Individual)

Percentage holding (%): \_\_\_\_\_

- **Please send copies of government-issued documents.**
- **For individuals, please submit personal identity documents.**
- **For companies, please submit Business Licences, Company Registration, or Tax ID Number Evidence.**

## Beneficial Owners (2)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Country of Incorporation: \_\_\_\_\_

(or Nationality if Individual)

Date of Incorporation: \_\_\_\_\_

(or Date of Birth if Individual)

Percentage holding (%): \_\_\_\_\_

- **Please send copies of government-issued documents.**
- **For individuals, please submit personal identity documents.**
- **For companies, please submit Business Licences, Company Registration, or Tax ID Number Evidence.**

### **Beneficial Owners (3)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Country of Incorporation: \_\_\_\_\_

(or Nationality if Individual)

Date of Incorporation: \_\_\_\_\_

(or Date of Birth if Individual)

Percentage holding (%): \_\_\_\_\_

- **Please send copies of government-issued documents.**
- **For individuals, please submit personal identity documents.**
- **For companies, please submit Business Licences, Company Registration, or Tax ID Number Evidence.**

### **Anti-Money Laundering Section**

Is your company subject to Anti-Money Laundering/Combating financial terrorism Law/Regulation?

Yes    No

If yes, please give details of the regulation and regulator.

\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Date: \_\_\_\_\_