

**Non-Personal Customer Information Form**
**FOR OFFICIAL USE ONLY**

SBS Account # \_\_\_\_\_

DEPEND Account # \_\_\_\_\_

**SECTION A – To be completed by all Applicants**
**(I) Company Information - Please note that additional documents may be required based on the information provided.**

- Business Type:**
- |  |                                  |  |
|--|----------------------------------|--|
| <input type="checkbox"/> Sole Trader       | <input type="checkbox"/> Club    | <input type="checkbox"/> Non-Governmental Organization |
| <input type="checkbox"/> Limited Liability | <input type="checkbox"/> Society | <input type="checkbox"/> Non-Profit Organization       |
| <input type="checkbox"/> Partnership       | <input type="checkbox"/> Charity |  |
| <input type="checkbox"/> Association       | <input type="checkbox"/> Trust   |  |

Business Name \_\_\_\_\_

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

 Operating Address \_\_\_\_\_  
*(if different from Registered Address)*
*The above Business address **must** be supported by one of the following **original** documents: (please indicate which is presented)*

- Water Bill   
  Electricity Bill   
  Telephone Landline Bill   
  Cable Bill   
  Other<sup>1</sup>

**Note: The document submitted must be dated within the last three (3) months to the registered address for the company**

Business Website \_\_\_\_\_

Country of Incorporation / Registration \_\_\_\_\_

Date Business Commenced \_\_\_\_\_

**Entity Contact Information:** Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Contact Person's Name \_\_\_\_\_ Position \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Cell # \_\_\_\_\_

**(II) Understanding the Relationship**

 (i) Purpose for opening account: \_\_\_\_\_  
*(E.g. Investment, IPO, sales, donations, membership dues etc.)*

 (ii) Nature and purpose of entity / Type of activity: \_\_\_\_\_  
*(E.g. area of expertise, type of organization)*

(iii) Source of Funding: \_\_\_\_\_

(iv) Principal Products / Beneficiaries: \_\_\_\_\_

(v) Primary Suppliers / Donor Base: \_\_\_\_\_

(vi) Description of Volunteer Base (if applicable) : \_\_\_\_\_

 (vii) Investment Risk Profile:     Low    Moderate    Speculative    High Risk

 (viii) Investment Objectives:     Income    Long Term Growth    Short Term Growth

 (ix) Estimated **Annual** Level of Activity \$ \_\_\_\_\_

**(III) Company Documentation**

 Please provide the following **original** company documentation based on the business/organization type:

*(Kindly tick the appropriate box if document is being provided)*

Company / Registered Business	Non-Profit Organization/Trust/ Non-Governmental Organization / Club / Association / Society / Charity
<input type="checkbox"/> Articles of Incorporation or Continuance <input type="checkbox"/> Certificate of Incorporation <input type="checkbox"/> Certificate of Continuation (if applicable) <input type="checkbox"/> Company By-Laws <input type="checkbox"/> Notice of Directors <input type="checkbox"/> Notice of Secretary <input type="checkbox"/> Notice of Address <input type="checkbox"/> Annual Return (most recent) <input type="checkbox"/> Minutes / Board Resolution to open account <input type="checkbox"/> List of Authorized Signatories & Signing Capacity	<input type="checkbox"/> Articles or Charter of Incorporation or Certificate of Non-Profit Organization Registration <input type="checkbox"/> Notice of Directors <input type="checkbox"/> Notice of Secretary <input type="checkbox"/> Notice of Address <input type="checkbox"/> Annual Return (most recent if applicable) <input type="checkbox"/> Minutes / Board Resolution to open account <input type="checkbox"/> By Laws (if applicable) <input type="checkbox"/> List of Authorized Signatories & Signing Capacity

<sup>1</sup> Lease agreement & recent receipt or letter from landlord/bill holder addressed to the Brokerage or Checking Register of Electors on EBC Website

<ul style="list-style-type: none"> <li><input type="checkbox"/> Utility Bill<sup>2</sup> (residential address) for each: <ul style="list-style-type: none"> <li><input type="checkbox"/> Director(s) &amp; Company Secretary</li> <li><input type="checkbox"/> Signatory</li> <li><input type="checkbox"/> Shareholder ≥10%</li> <li><input type="checkbox"/> Power of Attorney</li> </ul> </li> <li><input type="checkbox"/> Audited Financial Statements or Management Accounts (last three (3) years)</li> <li><input type="checkbox"/> For start-up entity: An opening Balance Sheet &amp; Cash Flow Projections (for next three (3) years)<sup>3</sup> or three (3) year estimates of income</li> <li><input type="checkbox"/> Banker's Reference <b>Or</b> copies/originals of three (3) months Bank Statements (applicable if no Financials / Management Accounts are available)</li> <li><input type="checkbox"/> Signed statement by Director outlining nature of the Business</li> <li><input type="checkbox"/> Copy of Bank Statement (for dividends)</li> <li><input type="checkbox"/> VAT Registration (where applicable)</li> <li><input type="checkbox"/> Copy of one (1) form of valid National Identification which shows nationality for each: <ul style="list-style-type: none"> <li><input type="checkbox"/> Director(s) &amp; Company Secretary</li> <li><input type="checkbox"/> Signatory</li> <li><input type="checkbox"/> Shareholder ≥10%<sup>4</sup></li> <li><input type="checkbox"/> Power of Attorney</li> </ul> </li> <li><input type="checkbox"/> Company Stamp</li> <li><input type="checkbox"/> Additional documents are required for: <ul style="list-style-type: none"> <li><input type="checkbox"/> Non-Nationals &amp; External Companies</li> <li><input type="checkbox"/> Powers of Attorney</li> <li><input type="checkbox"/> Listed / Non-Regulated Financial Institution</li> </ul> </li> <li><input type="checkbox"/> Evidence of submitted Foreign Investment Act Information from Minister of Finance (for Foreign Investors Only)</li> <li><input type="checkbox"/> Bank reference/copies or originals of bank statements from Foreign Bank (for Foreign Investors Only)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> List of Members</li> <li><input type="checkbox"/> Utility Bill<sup>2</sup> (residential address) for each: <ul style="list-style-type: none"> <li><input type="checkbox"/> All members of the Board / Trustees / Governing body / Highest Ranked Officers</li> <li><input type="checkbox"/> Signatory</li> <li><input type="checkbox"/> Shareholder ≥10% (if applicable)</li> <li><input type="checkbox"/> Powers of Attorney</li> </ul> </li> <li><input type="checkbox"/> Copy of one (1) form of valid National Identification which shows nationality for: <ul style="list-style-type: none"> <li><input type="checkbox"/> All members of the Board / Trustees / Protectors / Settlers or persons providing funds to the Trust / Persons with the power to add beneficiaries to the Trust / Governing body / Highest Ranked Officers</li> <li><input type="checkbox"/> Signatory</li> <li><input type="checkbox"/> Shareholder ≥10% (if applicable)</li> <li><input type="checkbox"/> Power of Attorney</li> </ul> </li> <li><input type="checkbox"/> Copy of most recent AGM Minutes</li> <li><input type="checkbox"/> Audited Financial Statements or Management Accounts (last three (3) years)</li> <li><input type="checkbox"/> For start-up entity: An opening Balance Sheet &amp; Cash Flow Projections (for next three (3) years) or three (3) year estimates of income</li> <li><input type="checkbox"/> Banker's Reference <b>Or</b> three (3) months of Bank Statements (applicable if no Financials / Management Accounts are available)</li> <li><input type="checkbox"/> VAT Registration (where applicable)</li> <li><input type="checkbox"/> Copy of Bank Statement (for dividends)</li> <li><input type="checkbox"/> Organization Stamp (for registered entities)</li> <li><input type="checkbox"/> Additional documents are required for: <ul style="list-style-type: none"> <li><input type="checkbox"/> Non-Nationals / Non-Residents</li> <li><input type="checkbox"/> Powers of Attorneys</li> <li><input type="checkbox"/> Listed Businesses / Non-Regulated Financial Institution</li> <li><input type="checkbox"/> Trust Accounts – Trust Deed</li> </ul> </li> </ul>
<b>Sole Trader</b>	<b>Partnership</b>
<ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Registration (applicable to Registered Businesses)</li> <li><input type="checkbox"/> Utility Bill<sup>2</sup> above required fin Sole Trader's personal name (res. address)</li> <li><input type="checkbox"/> Copy of one (1) form of valid National Identification which shows the Sole Trader's Nationality r.</li> <li><input type="checkbox"/> Audited Financial Statements or Management Accounts (for last three (3) years)</li> <li><input type="checkbox"/> For start-up entity: An opening Balance Sheet &amp; Cash Flow Projections (for next three (3) years) or three (3) year estimates of income</li> <li><input type="checkbox"/> Banker's Reference <b>Or</b> copies/originals of three (3) months of Bank Statements (applicable if no Financials / Management Accounts are available)</li> <li><input type="checkbox"/> VAT Registration (where applicable)</li> <li><input type="checkbox"/> Organization Stamp (for registered entities)</li> <li><input type="checkbox"/> Copy of Bank Statement (for dividends)</li> <li><input type="checkbox"/> Additional documents are required for: <ul style="list-style-type: none"> <li><input type="checkbox"/> Sole Traders who are Non-Nationals / Non-Residents</li> <li><input type="checkbox"/> Powers of Attorney</li> <li><input type="checkbox"/> External Companies</li> <li><input type="checkbox"/> Listed Businesses/ Non-Regulated Financial Institution</li> </ul> </li> <li><input type="checkbox"/> Bank reference / copies or originals of bank statements from Foreign Bank (for Foreign Investors Only)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Partnership (applicable to Registered Partnerships)</li> <li><input type="checkbox"/> Partnership Agreement</li> <li><input type="checkbox"/> Minutes / Board Resolution to open account</li> <li><input type="checkbox"/> List of Authorized Signatories &amp; Signing Capacity</li> <li><input type="checkbox"/> Utility Bill<sup>2</sup> required for the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> In Partnership's registered name (business location)</li> <li><input type="checkbox"/> For each Partner (residential address)</li> </ul> </li> <li><input type="checkbox"/> Copy of one (1) form of valid National Identification which shows nationality for each: <ul style="list-style-type: none"> <li><input type="checkbox"/> Partner</li> <li><input type="checkbox"/> Signatory</li> <li><input type="checkbox"/> Power of Attorney</li> </ul> </li> <li><input type="checkbox"/> Audited Financial Statements or Management Accounts (for last 3 years)</li> <li><input type="checkbox"/> For start-up entity: An opening Balance Sheet &amp; Cash Flow Projections (for next three (3) years) or three (3) year estimates of income</li> <li><input type="checkbox"/> Banker's Reference <b>Or</b> copies/originals of three (3) months of Bank Statements (applicable if no Financials / Management Accounts are available)</li> <li><input type="checkbox"/> VAT Registration (where applicable)</li> <li><input type="checkbox"/> Organization Stamp (for registered entities)</li> <li><input type="checkbox"/> Copy of Bank Statement (for dividends)</li> <li><input type="checkbox"/> Additional documents are required for: <ul style="list-style-type: none"> <li><input type="checkbox"/> Partners who are Non-Nationals / Non-Residents</li> <li><input type="checkbox"/> Powers of Attorneys</li> <li><input type="checkbox"/> Listed Businesses / Non-Regulated Financial Institution</li> </ul> </li> <li><input type="checkbox"/> Bank reference/copies or originals of bank statements from Foreign Bank (for Foreign Investors Only)</li> </ul>

<sup>2</sup> The utility bill submitted must be dated within the last three (3) months e.g. Water, Electricity, Telephone landline, Cable etc. (e-bills / paperless bills are acceptable). If the utility bill is not in the name of the entity/person as applicable, a letter from landlord / bill holder must be submitted along with the bill. In the absence of a utility bill, a lease agreement & recent receipt can be submitted in the name of the entity/person, as applicable.

<sup>3</sup> Startup entity refers to entities which have been in operation for less than three (3) years.

<sup>4</sup> Where a shareholder holding 10% or more of the company's shareholding is an entity, the Certificate of Registration / Incorporation is to be provided.

**SECTION B – External Companies & Third Party Signatories (Power of Attorney)**

(a) Will there be a Power of Attorney on this account? Yes  No

(b) If yes, (i) Name of Power of Attorney: \_\_\_\_\_  
 (ii) Please provide the locally registered Power of Attorney Deed or a notarized letter signed by Directors / Partners etc. granting third party access.

**SECTION C – Listed Businesses & Non-Regulated Financial Institutions**

**Note:** (i) Non-Regulated Financial Institutions include: Credit Unions, Building Societies, Co-operative Societies, Postal Services and Cash Remitters, Money or Value Transfer Service Providers.

(ii) Listed Businesses include: Real Estate Agents, Motor Vehicle Agents, Gaming Houses, Pool Betting, National Lotteries On-Line Betting Games, Jewellery Business, Private Member’s Clubs, Accountants, Attorneys-at-Law /other Independent Legal Professionals, Art Dealers, Trust and Company Service Providers, Non-Profit Organizations (NPOs).

(a) Is the company a Listed Business or Non-Regulated Financial Institution? Yes  No

(b) If yes, the following documentation is required: (please indicate which are provided)

- Please complete the attached KYC Questionnaire (AML 9 Form) - All Listed Businesses & Non-Regulated Financial Institutions.
- Proof of Registration as a Listed Business/Non-Regulated Financial Institution with the Financial Intelligence Unit of Trinidad and Tobago<sup>5</sup>. (Not required for non-profit organizations)

(c) For Sole Traders / Entities who are Attorneys / Accountants who are **not required** to be registered with the Financial Intelligence Unit of Trinidad and Tobago (FIUTT), please complete the following:

- Customer Declaration Form (Attorneys / Accountants) (AML 8 Form)

**SECTION D – To be completed by Company/Registered Business (Limited Liability)**

**(I) Verification of Shareholders holding 10% or more of total shares**

Name of Shareholder/ Nominee Shareholder	% Shareholding held	National ID# /PP # / Company Registration #	ADDRESS: (Please provide documentary evidence)

Please provide identification & proof of address for all Shareholders & /or Nominee Shareholders listed above (Refer to Section A III ).  
 Note - Certificate of Registration/Incorporation is required – **if the Shareholder is an Entity**

**SECTION E – To be completed for all Applicants**

**(I) Verification of ALL Directors, Company Secretary, Signatories, Sole Traders, Partners, Powers of Attorney, Key Functionaries, Members of the Governing Body or Board of Trustees etc.**

Name of Individual	Position	Signatory
1.		Yes <input type="checkbox"/> No <input type="checkbox"/>
2.		Yes <input type="checkbox"/> No <input type="checkbox"/>
3.		Yes <input type="checkbox"/> No <input type="checkbox"/>
4.		Yes <input type="checkbox"/> No <input type="checkbox"/>
5.		Yes <input type="checkbox"/> No <input type="checkbox"/>
6.		Yes <input type="checkbox"/> No <input type="checkbox"/>
7.		Yes <input type="checkbox"/> No <input type="checkbox"/>

Please provide identification & proof of address for all individuals listed above (Refer to Section A III)

**SECTION F - Other**

(a) Has any person listed in Section E above been entrusted with a local/foreign public function within the past two (2) years? Yes  No

(Examples of Public Functions include: Head of State/Government, Senior Government Official<sup>6</sup>, Senior Politician<sup>7</sup>, Senior Executive of State-owned corporations<sup>8</sup>, Military Official, Judicial Official, Important Political Party Officials<sup>9</sup>, Senior Official of an International Organization)

<sup>5</sup> Certificate of Registration with the FIU or a copy of the List of Registrants posted to the FIU’s Website which shows that the entity is listed as a Registrant.

<sup>6</sup> Senior Government Official – Permanent Secretary or an individual holding equivalent positions in a foreign country

<sup>7</sup> Senior Politician – Senators, Ministers of Parliament, Mayors

<sup>8</sup> Senior Executive of State-owned corporations – Chairman, Deputy Chairman, President or Vice President of the Board of Directors, Managing Director, General Manager, Comptroller, Secretary, Treasurer

<sup>9</sup> Important Political Party Official – Chairman, Deputy Chairman, Secretary, Treasurer

(b) If yes, please indicate the person's name(s), public function(s) and term(s) of service: \_\_\_\_\_

(c) Is any person listed in **Section E** above a close relative<sup>10</sup> or associate of someone who was entrusted with a local / foreign public function? Yes  No

(d) If yes, please indicate the person's name(s), public function(s) and term(s) of service: \_\_\_\_\_

(e) (i) Does the entity engage in **any** gambling activity including the housing of gaming machines? Yes  No

(ii) If yes, explain \_\_\_\_\_

(f) Is the entity a Financial Institution / Financial Intermediary<sup>11</sup>? Yes  No

(i) If yes, please complete the attached KYC Questionnaire (AML 9 Form)

**SECTION G – Company / Registered Business – Agent Accounts**

(a) Are funds held in escrow? Yes  No

(b) If yes, what is the source of funds? \_\_\_\_\_

(c) Who is/are the true owner(s) of the funds? \_\_\_\_\_

(d) Documentary evidence indicating the true owner(s) e.g. Legal Agreement obtained? Yes  No

**SECTION H - Rule / Policy Attachments & Fees / Charges**

Did you receive a copy of the following policies? And did you obtain an explanation on fees & charges?

Conflict of Interest Rule	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fairness in Allocation Policy	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Was the fee structure / transaction charges explained?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Please note that additional documents may be required based on information provided.**

**I/ We confirm that the information provided on this form is true and correct.**

_____	_____	_____	_____
Customer Signature	Date (dd/mm/yyyy)	Customer Signature	Date (dd/mm/yyyy)
_____	_____	_____	_____
Customer Signature	Date (dd/mm/yyyy)	Customer Signature	Date (dd/mm/yyyy)
_____	_____	_____	_____
Customer Signature	Date (dd/mm/yyyy)	Customer Signature	Date (dd/mm/yyyy)

Organization Stamp

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<sup>10</sup> Close relative refers to parents, siblings, spouse, children and step-children of the person who was entrusted with a local / foreign public function.

<sup>11</sup> Banks, Mutual Funds, Credit Unions, Unit Trust, Brokerage Companies, Insurance Companies, Investment Companies, Finance Companies, Mortgage Companies, Savings and Loan Associations etc., Money Service Businesses (MSBs) / Money or Value Transfer Services (MVTs) Businesses, Money Lenders.

**4 . Check List – Documents / Forms**

- Client Agreement	Yes <input type="checkbox"/>	- Risk Disclosure Statement (Form)	Yes <input type="checkbox"/>
- Non-Personal Customer Information Form (KYC)	Yes <input type="checkbox"/>	- Conflict of Interest Rules Statement	Yes <input type="checkbox"/>
- Utility Bills for Company & All relevant parties ( <i>dated within the last three (3) months</i> )	Yes <input type="checkbox"/>	- Policy re: Allocation of Investment Opportunity	Yes <input type="checkbox"/>
- Authorization Letter / Other Proof <sup>12</sup>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	- Customer Risk Rating Form (AML 5)	Yes <input type="checkbox"/>
- Valid National Identification for relevant parties	Yes <input type="checkbox"/>	- Source of Funds Declaration	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
- All On-Boarding Company Documents	Yes <input type="checkbox"/>	- Bank Statement	Yes <input type="checkbox"/>
- TTCD Mandate	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	- Dow Jones/Actimize WLF Scan	Yes <input type="checkbox"/>
- FATCA 1 A - Declaration of U.S. Status Form	Yes <input type="checkbox"/>	- Company Stamp	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
- Any other document e.g. 3 <sup>rd</sup> party documentation, Trust deed, FIU registration, etc.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	- Notary Public Seal / Stamp Required?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
		- Notary Public's Contact Information obtained? (address, e-mail, tel. number, etc.)	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

**5 . Is Enhanced Due Diligence (EDD) Required?**

Yes  No

*If yes, please ensure that the respective EDD is performed (see below for details).*

- Has the Client's Account been appropriately flagged as High Risk?	Yes <input type="checkbox"/>
- Bankers Reference/ Bank Statements three months (if applicable) obtained?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
- Senior Manager's approval obtained?	Yes <input type="checkbox"/>
- For MSB's - was Site visit conducted & Call Report Prepared?	Yes <input type="checkbox"/>
- For MSB's - was Group Compliance Approval Obtained?	Yes <input type="checkbox"/>
- AML 9 – Based on answers provided by Client is Group Compliance Approval Required? <sup>13</sup>	Yes <input type="checkbox"/> NO <input type="checkbox"/>
- Does the PEP / PEP-A have a personal Brokerage Account?	Yes <input type="checkbox"/> NO <input type="checkbox"/>
- If Yes to above, was their Brokerage Account Flagged as High Risk?	Yes <input type="checkbox"/>
- Evidence of POA / Trustee appointment obtained?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
- Evidence of FIU Registration / NPO Registration obtained?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
- Any other document requested by Group Compliance obtained?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

ADDITIONAL COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Investment Advisor Date (dd/mm/yyyy)

Brokerage Manager Date (dd/mm/yyyy)

Input Clerk Date (dd/mm/yyyy)

Supervisor (Input Verification-Depend) Date (dd/mm/yyyy)

Supervisor (Next Day Audit- SBS) Date (dd/mm/yyyy)

<sup>12</sup> Lease agreement & recent receipt or letter from landlord/bill holder addressed to the Brokerage or Checking Register of Electors on EBC Website.

<sup>13</sup> Refer to Admin S&P No. 12 dd February 6<sup>th</sup> 2020 for guidelines