KNOW YOUR CUSTOMER FORM – Corporate Clients

| In accordance with the Anti-Money Launder 2011-23 you are required to provide the info <i>For more information contact BEAVA Inc: 1-24</i> | ormation below: | |
|--|---------------------------------|--|
| Information for Corporate Clients | | |
| Name of Company/Partnership/Association: | | |
| Date of Incorporation: | Country of Incorporation | 1: |
| Incorporation No: | Type of Company: | |
| Business Activity: | Website: | |
| Address of Registered Office: | | |
| Mailing Address: | | |
| Telephone Number | Fax Number | |
| Email Address | | |
| Name of Beneficial Owner(s)/Representative(s |)** | |
| Surname Gi Job Title of Representative: | iven Name | Middle Name |
| Location (Country where funds are located) | | |
| Personal Information on Beneficial Owners/Re (to be completed by each Beneficial Owners with a mini | | npany representative) |
| Name: <i>Surname Given Name</i> | | · 1 11 - X7 |
| Surname Given Name | | iddle Name |
| Date of Birth (D/M/YY): | | |
| Nationality: Reside | nce (Country of) | |
| Telephone Nos. Home: Cell: | Business: | |
| Email Address: | | |
| Personal ID#1 		ID Card | Personal ID#2 Place of issue | 2 ID Card Passport Driver's License Other ID # |



If Yes state your relationship _____

Source of Funds:

State Source of Funds (Origin of funds to purchase real estate)

Financial Institution

Location (Country where funds are located)

Required Supporting Documentation:

- □ Certified copy of corporate instruments (certificate and articles of incorporation or equivalent documents) or certified copy of partnership deed, registration of business name or equivalent documents. Copy of company bylaws.
- □ List of directors
- □ List of shareholders with 20% or more Shares
- □ 2 Personal photographic identification for each Beneficial Owner/Shareholder with a minimum of 20% ownership. (e.g. Passport, National Identification Card or Driver's License along with Social Security Number or equivalent, if non-resident). These must show, at a minimum, the person's photograph, date of birth and signature.
- □ Proof of address for each Beneficial Owner/Shareholder with a minimum of 20% shares/ownership
- □ Board resolution authorizing the business activity and conferring authority on signatories to the transaction, where appropriate.
- D Proof of funds (*Pre-approval from financial institution, bank reference, or audited financial statements*).

Signature: _____

Date (D/M/YY): _____

NOTE:

*Politically Exposed Person (PEP)

The FATF Recommendations categorizes PEPs as follows:

Foreign PEP as "individuals who are or have been entrusted with prominent public functions by a foreign country (e.g. Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political parties officials").

Domestic PEP as "individuals who are or have been entrusted domestically with prominent public functions (e.g. Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political parties officials").

Persons who are or have been entrusted with the prominent function by an international organization refer to members of senior management, i.e., directors, deputy directors and members of the board or equivalent functions. The definition of PEP is not intended to cover middle ranking or more junior individuals in the foregoing categories.

**Beneficial Owner

FATF definition: Beneficial owner refers to the natural person(s) who ultimately owns or controls a customer and/or the natural person on whose behalf a transaction is being conducted. It also includes those persons who exercise ultimate effective control over a legal person or arrangement.

