

DUE DILIGENCE QUESTIONNAIRE

Know Your Customer (K.Y.C.)- New Client

In order to duly comply with the provisions of the **Prevention and Suppression of Money Laundering Activities Law** and the relevant guidelines and directive of the ICPAC to which we are accountable, please fill-in the following questionnaire and provide us with the documents indicated below.

Please note the following:

- 1) If any of the documents to be provided is not in English, we must be provided with a certified translation of such document in English. (A certified translation by a qualified lawyer is acceptable).
- 2) If there is not enough space to fill in the names of all the beneficial owners, registered shareholders and directors, please fill in and attach an additional page, making sure to attach all requested information for such beneficial owner, registered shareholder or director.
- 3) We need to be notified in writing of any change in the information provided herein either prior to any such change or immediately thereafter.
- 4) This questionnaire must be signed by all the ultimate beneficial owners of the company.
- 5) We will assume that any gaps not completed in this questionnaire, have not been completed because they are not applicable.
- 6) Documents to be issued by a reputable lawyer or accountant need to include its full name, profession, professional body with which they are registered and contact details (i.e. professional address, e-mail, telephone no.)



WORLDWIDE CORPORATE SERVICES LTD

A. **Company Name/ Proposed Name** :

B. **Country of Registration**:

C. **Trading Address**:

D. **General information**:

1) Please provide a Detailed description of the business activities of the company:

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.....
.....

2) Please provide details of the source/origin of funds to be used for the initial business capital of the company (e.g. own funds of shareholder, funds borrowed by shareholder, etc.):

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.....
.....

3) Please provide approximate value of wealth of each of the beneficial owners with details of the source/origin of wealth of each beneficial owner (i.e. inheritance, accumulated wealth, property, investment). Supporting documentation may be required:

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.....

4) Expected value of assets to be held by the company:

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.....

5) Expected Annual Turnover for the company:

6) Countries in which the company is expected to have transactions:

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.....
.....

7) Main Counterparties and their country of operations:

.....
.....
.....

Business Address: 32 Kritis Street,
Papachristoforou Build., 4th floor, 3087 Limassol, Cyprus
Postal Address: P.O.Box 54544, 3725 Limassol, Cyprus
Tel.: +357 25 11400 – Fax: +357 25 114001
URL: www.wcs.com.cy – E-mail: info@wcs.com.cy



WORLDWIDE CORPORATE SERVICES LTD

8) Company will employ staff in Cyprus or Abroad?.....

9) Proposed capital structure (if the capital is higher than € 1.710, extra fees are applicable):

	Number of shares	Value in EURO
a. Authorized capital	_____	_____
b. Issued capital	_____	_____

E. Services to be offered by WCS:

- 1) Nominee Corporate Director: Yes / No
- 2) Nominee Individual Director: Yes / No
- 3) Nominee Corporate Shareholder: Yes / No
- 4) Nominee Individual Shareholder: Yes / No
- 5) Nominee Secretary: Yes / No
- 6) Register address: Yes / No

If No please advise the proposed registered address of the company

.....

- 7) Bank account opening: Yes / No,

If Yes with which Bank Institutions:

.....

Currency of the Account:

.....

Advise Anticipated Inward/ outward turnover for the next 12 months

.....

- 8) Bank Signatory: Yes / No

If No please advise the name of the bank signatory

.....

- 9) Accounting Services: Yes / No

- 10) VAT registration: Yes / No

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WORLDWIDE CORPORATE SERVICES LTD

F. **Ultimate beneficial owner(s) – Individuals** (if more than 2 please attach additional page)

1) Title: Mr / Mrs/ Dr

Name(s) & Surname:.....

Father's Name

Previous Name(s).....

Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:..... Expiry Date of Passport:

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

City/Town/Village:

Post Code: State /Country:

Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:

Has the above person ever been charged or convicted for any criminal offence? Yes/No

If the answer is YES, please provide more information:

.....



WORLDWIDE CORPORATE SERVICES LTD

Have you or any of your immediate family members or any of your close associates been entrusted with any prominent public functions, now or in the past? Yes /No

Are you, or have you ever been, an un-discharged bankrupt? Yes /No

Have you ever been the subject of a judicial or other official enquiry? Yes /No

Please provide information as to the source of your capital/assets/income:

1. Average Annual Income:.....
2. Source of Income/Wealth:.....
3. Countries in which wealth has been accumulated:.....

Percentage of participation in the company:

2) Title: Mr / Mrs/ Dr

Name(s) & Surname:.....

Father's Name

Previous Name(s).....

Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:..... Expiry Date of Passport:

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

City/Town/Village:

Post Code: State /Country:

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Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:

Has the above person ever been charged or convicted for any criminal offence? Yes/No

If the answer is YES, please provide more information:

.....
.....

Have you or any of your immediate family members or any of your close associates been entrusted with any prominent public functions, now or in the past? Yes /No

Are you, or have you ever been, an un-discharged bankrupt? Yes /No

Have you ever been the subject of a judicial or other official enquiry? Yes /No

Please provide information as to the source of your capital/assets/income:

1. Average Annual Income:.....

2. Source of Income/Wealth:.....

3. Countries in which wealth has been accumulated:.....

Percentage of participation in the company:

PLEASE INDICATE IF THERE ARE MORE BENEFICIAL OWNERS: YES/NO

IF THERE ARE MORE BENEFICIAL OWNERS, PLEASE INDICATE NO.: AND FILL-IN AND ATTACH ADDITIONAL PAGE.

Please attach the following:

1) Certified copy of passport, certified by a reputable lawyer, bank, accountant (resident in the country of habitual residence of the person for whom the information is collected) or notarized and legalized with an Apostille;

2) If the certified copy of passport described in 1 above does not include the current permanent address, original recent utility bill (max. 3 months old) as evidence of permanent address.

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3) Reference Letter from Bank or reputable Accountant / Lawyer (resident in the country of habitual residence of the person for whom the information is collected) verifying the following:

- (i) the identity of the natural person;
- (ii) the person's current permanent address;
- (iii) the person's good standing / reputation; and
- (iv) the person's specimen signature (if there is no signature on the passport)

4) CV – describing nature of business of the ultimate beneficial owner

5) (a) A structure chart, depicting the chain of ownership behind the Cyprus company up to the ultimate beneficial owners (individuals) and the name, address, date and place of incorporation of each entity in the chain of ownership and their percentages of ownership.

(b) For each legal entity in the chain of ownership, please provide us with its certificate of incorporation and evidence of the registered address and shareholding (from an official source).

(c) If any one of the legal entities in the chain of ownership is a Trust, please provide us with a copy of the Trust Deed, a copy of its certificate of Registration (if it is registered) and the name, date and place of creation of the Trust and the names and addresses of the trustee, the settlor, all known beneficiaries and the protector and/or enforcer (if any).

(d) If any one of the legal entities or individuals in the chain of ownership is holding the shares pursuant to a trust arrangement, please provide us with a copy of the Trust Deed, Declaration of Trust or any other document evidencing the trust arrangement.

(e) If any of the legal entities in the chain of ownership or the registered shareholder is a Fund, please provide us with a copy of its constitutional document and a certificate

of incorporation and confirmation of the registered address of the company managing the fund.

(f) if any of the legal entities in the chain of ownership or the registered shareholder is a listed company whose securities are trading on a regulated market in a country of the European Economic Area or in a third country which is subject to disclosure requirements consistent with European community legislation, please provide us with the name of the company, the country in which the securities are traded, the stock exchange in which the securities are traded and the trading code.

(g) if any one of the legal entities in the chain of ownership is a partnership, please provide us with the name, address, date and place of formation of the partnership and the names and addresses of all partners, both limited and general and their percentages of interest. Furthermore, please provide us with a copy of the partnership agreement and evidence as to who binds the partnership.



WORLDWIDE CORPORATE SERVICES LTD

G. **Details of Registered Shareholders** (if not the same as Ultimate beneficial owner and if not WCS nominee shareholders)

Will the registered shareholder be a natural person? Yes / No

If any one of the registered shareholders is a natural person, has this person ever been charged or convicted for any criminal offence? Yes /No

If the answer is YES, please provide more information:

.....
.....

Will the registered shareholder be holding the shares in a nominee capacity? Yes / No

If the answer is YES, please provide the information requested in Part E in relation to the beneficial owner of the shares.

If the registered shareholder will be a company or other legal entity, please complete the below (if more than 2, please fill-in and attach additional page)

1) Name: Previous Name:

Country of Registration: Registration No.:

Registered Office Address:

Brief Description of business activities:.....
.....

Tel. (Off.) Fax

E-mail address:

Percentage of participation in the company:

2) Name: Previous Name:

Country of Registration: Registration No.:

Registered Office Address:

Brief Description of business activities:.....
.....

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WORLDWIDE CORPORATE SERVICES LTD

Tel. (Off.) Fax

E-mail address:

Percentage of participation in the company:

PLEASE INDICATE IF THERE ARE MORE REGISTERED SHAREHOLDERS: YES/NO

IF THERE ARE MORE REGISTERED SHAREHOLDERS, PLEASE INDICATE NO.: AND
FILL-IN AND ATTACH ADDITIONAL PAGE

Please attach the following:

- 1) Certified copies of certificates of incorporation, registered address and certificates of shareholders, directors and secretary (or certified copies of equivalent certificates issued in the country of incorporation of the legal entity).
- 2) Certificate of Good Standing (not more than 3 months old), if such a certificate is issued in the country of incorporation of the company, or any other equivalent document.



WORLDWIDE CORPORATE SERVICES LTD

H. **Details of Directors** (if not WCS nominee director)

i. **Natural Person** (if more than two, please fill-in and attached additional page)

1) Title: Mr / Mrs/ Dr

Name(s) & Surname:.....Father's Name

Previous Name(s).....Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:..... Expiry Date of Passport:

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

.....

City/Town/Village:

Post Code: State /Country:

Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:

Has the above person ever been charged or convicted for any criminal offence? Yes/No

If the answer is YES, please provide more information:

.....

.....



WORLDWIDE CORPORATE SERVICES LTD

2) Title: Mr / Mrs/ Dr

Name(s) & Surname:.....Father's Name

Previous Name(s).....Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:.....Expiry Date of Passport:

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

City/Town/Village:

Post Code: State /Country:

Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:

Has the above person ever been charged or convicted for any criminal offence? Yes/No

If the answer is YES, please provide more information:

.....

.....

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URL: www.wcs.com.cy – **E-mail:** info@wcs.com.cy



WORLDWIDE CORPORATE SERVICES LTD

Please attach the following:

1) Certified copy of passport, certified by a reputable lawyer, bank, accountant (resident in the country of habitual residence of the person for whom the information is collected) or notarized and legalized with an Apostille;

2) If the certified copy of passport described in 1 above does not include the current permanent address, original recent utility bill (max. 3 months old) as evidence of permanent address.

3) Reference Letter from Bank or reputable Accountant / Lawyer (resident in the country of habitual residence of the person for whom the information is collected) verifying the following:

- (i) the identity of the natural person;
- (ii) the person's current permanent address;
- (iii) the person's good standing / reputation; and
- (iv) the person's specimen signature (if there is no signature on the passport)

4) CV

ii. **Legal Person** (if more than two, please fill-in and attached additional page)

Are all the directors of the company which are legal persons licensed under the Law Regulating Companies Providing Administrative Services and Related Matters of 2012?

Yes/ No

If yes, please state the Body with which such director is registered and the registration no. /license no. of each director company:

.....

1) Name: Previous Name:

Country of Registration: Registration No.:

Registered Office Address:

Brief Description of business activities:.....

.....

Tel. (Off.) Fax

E-mail address:

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WORLDWIDE CORPORATE SERVICES LTD

2) Name: Previous Name:

Country of Registration: Registration No.:

Registered Office Address:

Brief Description of business activities:.....

.....

Tel. (Off.) Fax

E-mail address:

PLEASE INDICATE IF THERE ARE MORE REGISTERED DIRECTORS: YES/NO

IF THERE ARE MORE REGISTERED DIRECTORS, PLEASE INDICATE NO: AND FILL-
IN AND ATTACH ADDITIONAL PAGE

Please attach the following:

1) Certified copies of certificates of incorporation, registered address and certificates of shareholders, directors and secretary (or certified copies of equivalent certificates issued in the country of incorporation of the legal entity).

2) Certificate of Good Standing (not more than 3 months old), if such a certificate is issued in the country of incorporation of the company, or any other equivalent document.



WORLDWIDE CORPORATE SERVICES LTD

I. **Details of Secretary** (if not WCS nominee Secretary)

i. **Natural Person**

Title: Mr / Mrs/ Dr

Name(s) & Surname:.....Father's Name

Previous Name(s).....Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:..... Expiry Date of Passport:

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

City/Town/Village:

Post Code: State /Country:

Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:



WORLDWIDE CORPORATE SERVICES LTD

Please attach the following:

- 1) Certified copy of passport, certified by a reputable lawyer, bank, accountant (resident in the country of habitual residence of the person for whom the information is collected) or notarized and legalized with an Apostille;
- 2) If the certified copy of passport described in 1 above does not include the current permanent address, original recent utility bill (max. 3 months old) as evidence of permanent address.
- 3) Reference Letter from Bank or reputable Accountant / Lawyer (resident in the country of habitual residence of the person for whom the information is collected) verifying the following:
 - (i) the identity of the natural person;
 - (ii) the person's current permanent address;
 - (iii) the person's good standing / reputation; and
 - (iv) the person's specimen signature (if there is no signature on the passport)

ii. **Legal Person**

Name: Previous Name:

Country of Registration: Registration No.:

Registered Office Address:

Tel. (Off.) Fax

E-mail address:

Please attach the following:

- 1) Certified copies of certificates of incorporation, registered address and certificates of shareholders, directors and secretary (or certified copies of equivalent certificates issued in the country of incorporation of the legal entity).
- 2) Certificate of Good Standing (not more than 3 months old), if such a certificate is issued in the country of incorporation of the company, or any other equivalent document.



WORLDWIDE CORPORATE SERVICES LTD

J. **Authorized Person/ Consultant** (if more than two, please fill-in and attached additional page)

1) Title: Mr / Mrs/ Dr

Name(s) & Surname:.....Father's Name

Previous Name(s).....Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:..... Expiry Date of Passport:

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

City/Town/Village:

Post Code: State /Country:

Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:

2) Title: Mr / Mrs/ Dr

Name(s) & Surname:.....Father's Name

Previous Name(s).....Date of Birth:/...../.....

Nationality..... Marital Status:

Passport Number & Country of issue:.....

Issue Date of Passport:..... Expiry Date of Passport:

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Tel.: +357 25 11400 – **Fax:** +357 25 114001
URL: www.wcs.com.cy – **E-mail:** info@wcs.com.cy



WORLDWIDE CORPORATE SERVICES LTD

Tax Residency Tax Number:.....

Occupation/ Nature of Business:.....

Residential Address:

City/Town/Village:

Post Code: State /Country:

Contact Address (if different from Residential Address).....

.....

City/Town/Village:

Post Code: State /Country:

Personal Contact Details:

Tel. (Off.): Tel. (Res.):

Mobile: Fax:

E-mail address:

Please attach the following:

- 1) Certified copy of passport, certified by a reputable lawyer, bank, accountant (resident in the country of habitual residence of the person for whom the information is collected) or notarized and legalized with an Apostille;
- 2) If the certified copy of passport described in 1 above does not include the current permanent address, original recent utility bill (max. 3 months old) as evidence of permanent address.



WORLDWIDE CORPORATE SERVICES LTD

K. Questions to be answered in relation to funds:

1. Have you, or any entity that you have been associated with, ever been refused or had revoked a license, permit or other authorization to provide investment business to the public in any jurisdiction? Yes/ No
2. Have you ever been the subject of investigation, proceeding or other enquiry by a self-regulatory organization of which you are or were a member? Yes/ No
3. Have you or any entity that you have been associated with, ever been refused or had revoked a license, permit or other authorization to conduct investment business in any jurisdiction? Yes/ No
4. Are you a member in good standing of any self-regulatory organization(s)? Yes/ No
If yes, please name the organization:

L. Declaration / Consent

I am the **ultimate beneficial owner** of the private company named in paragraph (A) above and I hereby declare and confirm the following:

1. The above information is true and accurate.
2. The above information can be disclosed to any relevant supervisory or other authority of the Republic of Cyprus, if such disclosure is required by law.
3. I have not benefited directly or indirectly from any criminal conduct anywhere in the world and / or benefited from any funds which consist of proceeds of criminal conduct.
4. I undertake to notify you in writing of any change in the above information either prior to any such change or immediately thereafter.

.....
Name (in full), Date and Signature

.....
Name (in full), Date and Signature