

BOURSE NON-DOM SOLUTION

CLIENT DUE DILIGENCE FORM

INSTRUCTIONS FOR COMPLETION

For notes on completing this application form, please click [here](#)

Please complete this form for the Lead Applicant and for any Additional Individual who will benefit from any trust or bond supplied by Bourse Group as part of the Lead Applicant's Bourse Non-Dom Solution.

Please ensure that, together with this form:

1. All CDD Documentation is provided for the Lead Applicant; and
2. A Self-Certification Form is completed and provided for each relevant individual.

(A) KEY INDIVIDUALS

A – LEAD APPLICANT

Your full legal name:			
Previous / other names: (if applicable)			
Principal residential address:			
Correspondence address: (if different)			
Country of birth:		Country of residence:	
Date of birth:		Nationality:	
Occupation			
Any public position held or any reason why I might be considered a Politically Exposed Person:			
Contact details:	Telephone home:		
	Telephone work:		
	Mobile		
	Email personal:		
	Email work:		

B – ADDITIONAL INDIVIDUAL 1

Your full legal name:			
Previous / other names: (if applicable)			
Principal residential address:			
Correspondence address: (if different)			
Country of birth:		Country of residence:	
Date of birth:		Nationality:	
Occupation			
Any public position held or any reason why I might be considered a Politically Exposed Person:			
Contact details:	Telephone home:		
	Telephone work:		

	Mobile	
	Email personal:	
	Email work:	
	Relationship to Lead Applicant:	

C – ADDITIONAL INDIVIDUAL 2

Your full legal name:			
Previous / other names: (if applicable)			
Principal residential address:			
Correspondence address: (if different)			
Country of birth:		Country of residence:	
Date of birth:		Nationality:	
Occupation			
Any public position held or any reason why I might be considered a Politically Exposed Person:			
Contact details:	Telephone home:		
	Telephone work:		
	Mobile		
	Email personal:		
	Email work:		
	Relationship to Lead Applicant:		

D – ADDITIONAL INDIVIDUAL 3

Your full legal name:			
Previous / other names: (if applicable)			
Principal residential address:			
Correspondence address: (if different)			
Country of birth:		Country of residence:	

Date of birth:		Nationality:	
Occupation			
Any public position held or any reason why I might be considered a Politically Exposed Person:			
Contact details:	Telephone home:		
	Telephone work:		
	Mobile		
	Email personal:		
	Email work:		
	Relationship to Lead Applicant:		

E – ADDITIONAL INDIVIDUAL 4

Your full legal name:			
Previous / other names: (if applicable)			
Principal residential address:			
Correspondence address: (if different)			
Country of birth:		Country of residence:	
Date of birth:		Nationality:	
Occupation			
Any public position held or any reason why I might be considered a Politically Exposed Person:			
Contact details:	Telephone home:		
	Telephone work:		
	Mobile		
	Email personal:		
	Email work:		
	Relationship to Lead Applicant:		

(B) CDD REQUIREMENTS

1 – LEAD APPLICANT AND ADDITIONAL INDIVIDUAL DUE DILIGENCE CHECKLIST

Due diligence documents must be enclosed with the application. Bourse reserves the right to request additional documentation.

(please tick)

Proof of identity	<u>Certified</u> copy of your current Passport or National Identity Card .	<input type="checkbox"/>
Proof of residence	<u>Certified</u> copy of one of the following documents which confirms your principal residential address. Bank statement; Credit card statement; Mortgage statement; Gas, water, electric, cable TV or landline telephone bill; Local authority council tax bill, household insurance certificate. The document must have been issued within the past three months when received by Bourse. If none of the above are possible, Bourse will also accept a certified copy of a European Union member state identity card, (if not used for proof of identity) or a full UK Driving Licence.	<input type="checkbox"/>
1 Who can certify?	A suitable certifier includes a professional such as a Notary Public, Lawyer, Actuary or Accountant who is a current member of a recognised professional body, a Member of the Judiciary, an Officer of an Embassy, Consulate or High Commission, a serving Police Officer, an individual subject to other professional rules or a member of an industry body providing for the integrity of conduct, or an individual or member of a firm previously agreed with Bourse.	
2 Form of certification	The certifier must inspect the original document and then certify on a clear and complete copy of the original using the words: 'I certify that I have seen the original document, of which I certify this is a true copy' , and in addition, for documents bearing a photograph, 'I confirm that the photograph is a true likeness of the bearer whom I have met in person.' The certifier should print his/her <u>full</u> name and address, sign and date the certified documents, stating the location in which the certification was carried out. The certifier should also add his/her stamp (if applicable), and confirm his/her contact details (email and/or telephone number) and professional body details (including membership number).	

2 – SOURCE OF WEALTH

The description of the Source of Wealth for the funds going into a trust, applied to purchase a bond or used to acquire any other Bourse product must allow the Bourse Group to fully understand how the Lead Applicant acquired the relevant assets – a list of the assets themselves is not required.

To the extent Source of Wealth has already been provided and agreed with the Bourse Group as part of the 'Pre-Approval' process, this should be stated below.

Source of Wealth	(please tick)-	Details must be completed:
Accrued savings If ticked, please give details, specifying how savings have been acquired (e.g. from employment, giving the name and address of the employer and the period over which savings have been acquired).	<input type="checkbox"/>	
Inheritance If ticked, please give details, specifying the approximate amount, date and details of any inheritance(s) received.	<input type="checkbox"/>	
Sale of business/property If ticked, please provide details, specifying the name and address of any property/business sold and the date of sale.	<input type="checkbox"/>	
Other If ticked, please provide details.	<input type="checkbox"/>	

(C) SELF CERTIFICATION FOR AUTOMATIC EXCHANGE OF INFORMATION

1 – TAX RESIDENCE SELF-CERTIFICATION FOR LEAD APPLICANT AND ANY ADDITIONAL INDIVIDUALS

We are legally obliged to obtain a certification of tax residence from the Lead Applicant under regulations giving effect to a growing network of inter-governmental tax information sharing arrangements. We may also be required to share information concerning the proposed trust and its beneficiaries with Guernsey's Director of Income Tax for onward transmission to the tax authorities of the jurisdiction(s) in which a settlor or a beneficiary of the proposed trust is tax resident, and/or with other Financial Institutions. We therefore request that the Lead Applicant completes the below self-certification.

2 - TAX RESIDENCY SELF-CERTIFICATION

Full name:	
Place of birth:	
Town/city:	Country:
Date of birth: (DD/MM/YYYY)	
Permanent residential address:	

For the purposes of taxation, I am a resident or citizen in the following countries, and my TIN (tax identification number)/functional equivalent in each country is set out below, or I have indicated that a TIN/functional equivalent is not available:-	
Country:	TIN or tick box if TIN is unavailable:
_____	_____ <input type="checkbox"/>
_____	_____ <input type="checkbox"/>
_____	_____ <input type="checkbox"/>

Authorisations and confirmations:-

1. I authorise the relevant Bourse Group entity receiving this information (the "Recipient") to provide, directly or indirectly, to any relevant tax authorities or any party authorised to audit or conduct a similar control of the recipient for tax purposes, a copy of this form and to disclose to such tax authorities or such party any additional information that the Recipient may have in its possession that is relevant to my qualification for any benefits claimed on the basis of this Declaration. I acknowledge and agree that information contained in this form and information regarding income paid or credited to or for the benefit of the account(s) set out above may be reported to the tax authorities of the country in which such income arises and that those tax authorities may provide the information to the country or countries in which I am a resident for tax purposes.

2. I authorise the Recipient to provide, directly or indirectly, a copy of this form and information regarding income paid or credited to or for the benefit of the account(s) set out above to: (i) any person that has control, receipt, or custody of income to which this form relates; (ii) any person that can disburse or make payments of income to which this form relates; or (iii) any party authorised to audit or conduct a similar control of aforementioned persons for tax purposes.
3. I certify that I am the beneficial owner (or am authorised to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner of an account held at the Recipient financial institution.
4. I hereby confirm that the information provided in or in connection with this certification is true to the best of my knowledge and belief, correct and complete.
5. I undertake to promptly (within 30 days) inform Bourse of any changes in circumstances that result in the information provided in or in connection with this form becoming inaccurate.

Signature:		Date signed:	
Print name:			