

AMICUS AML FORM

CLIENT INFORMATION FORM (INDIVIDUALS including Agents)

Explanatory Note to Clients on Anti-Money Laundering (AML) Regulations: All lawyers are required by law to perform identity & verification checks on transaction and risks, both prior to accepting instructions to act & on an on-going basis. Please note that we are required to maintain such documentation and records, which will be made available for disclosure to authorised officers if it is required for compliance with any of the AML regulations. We therefore seek your kind understanding and cooperation in the provision of all information requested as follows.

Property Address:			
Reference No.:		Lawyer/ Secretary	
Subject Matter:			

1. CLIENT PARTICULARS

A.	Client's Full Name (incl. aliases)		
B.	Name of Beneficial Owner (if individual is not the true Owner)		
C.	Residential Address		
D.	NRIC/ Passport No.		Singapore PR: Yes/ No
E.	Nationality		Gender:
F.	Date of Birth		
G.	Place of Birth		
H.	Contact No.(s) & Email		
I.	Occupation & Job Title		
J.	Name of Employer in Full (if any)		
K.	For Purchase Only: Purpose of Purchase	<input type="radio"/> Owner-Occupation <input type="radio"/> Investment/Rental <input type="radio"/> Others (Please specify)	_____
L.	Source of funds for the purpose of this particular transaction (check all that is applicable)	<input type="radio"/> Business Profits <input type="radio"/> Gift/ Inheritance <input type="radio"/> Savings <input type="radio"/> Sale of Real Estate (Please specify) <input type="radio"/> Others (Please specify)	<input type="radio"/> Salary/ Income <input type="radio"/> Investment Earnings _____ _____
M.	Are you a current or former Politically Exposed Person (PEP) entrusted with a prominent public function ¹ in a foreign country? <i>Alternatively: Are you a current or former Politically Exposed Person (PEP) entrusted with a prominent public function locally or in a foreign country?</i>	<input type="radio"/> No	<input type="radio"/> Yes (Please provide details) _____

¹ "Prominent public function" includes the role held by a head of state, a head of government, a senior politician, a senior civil or public servant, a senior government, judicial or military official, a senior executive of a state-owned corporation, a senior political party official, a member of the legislature, or a member of the senior management of an international organisation.

AMICUS AML FORM

N.	Are you a family member ² or a close associate ³ of a current or former foreign PEP? <i>Alternatively: Are you a family member⁴ or a close associate of a current or former local or foreign PEP?</i>	<input type="radio"/> No	<input type="radio"/> Yes (Please provide details) _____ _____
----	---	--------------------------	--

2. DOCUMENTS TO BE PROVIDED

Please provide the documents that have been indicated.

A.	<ul style="list-style-type: none"> <input type="radio"/> Copy of NRIC/ Passport of the client certified as a true copy by the lawyer (where there is a face-to-face meeting with the client and the lawyer has sighted the original NRIC/ Passport). <input type="radio"/> For Foreigners: Copy of Passport of the client certified as a true copy by the lawyer after sighting the original AND proof of address document. <input type="radio"/> Original written verification of identity of client by an advocate and solicitor or a notary public in client's jurisdiction together with certified true copy of the client's identity document.
B.	<p>Powers of Attorney (Filled up by Attorney) (if applicable)</p> <ul style="list-style-type: none"> <input type="radio"/> Purpose of Power of Attorney: _____ <p>Where the client is conferring a power of attorney,</p> <ul style="list-style-type: none"> <input type="radio"/> details of the attorney (including name, aliases (if any), address, identification no., date of birth, nationality, etc.) have to be provided together with a certified true copy of the identification document (certified by a notary public of the relevant jurisdiction or a Singapore advocate and solicitor). <input type="radio"/> original letter from client confirming relationship with agent/ attorney and that his/ her agent/ attorney has the authority to give instructions to _____.

3. DECLARATION

- A. I hereby declare and confirm that the information above is, to the best of my knowledge, correct and accurate and have not wilfully withheld any material fact or information from _____.
- B. I shall give _____ written notice of any change in my particulars throughout the course of the representation.
- C. There are no legal proceedings against me in Singapore or otherwise, and I have not been convicted of any tax crimes.
- D. I give consent to _____ to contact me for the purpose of _____'s compliance with the Regulatory Guidelines on Prevention of Money Laundering and Countering the Financing of Terrorism.
- E. I will indemnify _____ from any and all cost and expenses arising from as a result of any inaccurate information, false and misleading representation provided by me and relied upon by the firm.

² "Family member", in relation to a foreign PEP, means a spouse, a child, an adopted child or a stepchild, a sibling, an adopted sibling or a stepsibling or a parent or stepparent, of the foreign PEP.

³ "Close associate", in relation to a PEP, means, a partner of the foreign PEP, a person accustomed or under an obligation whether formal/ informal to act in accordance with the directions, instructions, or wishes of the foreign PEP, a person whose directions instructions or wishes the foreign PEP is accustomed or under an obligation, whether formal/ informal, to act in accordance with, or a person with whom the foreign PEP has an agreement/ arrangement whether oral/in writing and whether express/ implied, to act together.

⁴ "Family member", in relation to a foreign PEP, means a spouse, a child, an adopted child or a stepchild, a sibling, an adopted sibling or a stepsibling or a parent or stepparent, of the foreign PEP.

AMICUS AML FORM

Name of Client:

Date:

FOR OFFICIAL USE ONLY

RISK PROFILE ASSESSMENT

- o Low Risk
- o To seek advice/ approval of Senior Management for further compliance/ risk mitigation measures
- o High Risk – Please provide reason(s)/comment(s)

Please refer matter to Senior Management/ Directors

Reviewed by Lawyer: _____ (initial)

Date: