

**Interested Party Questionnaire : Individual**

**A : PERSONAL DETAILS**

**A1. Name of Interested Party**

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**A2. Details of the Interest**

Nature of interest	
Client	

**A3. Main residential address (If resident there less than 5 years, please also provide previous address)**

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**A4. Business address**

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**A5. Contact details**

Telephone (home)	
Fax (home)	
Telephone (business)	
Fax (business)	
Mobile / Cell telephone	
Email	

**A6. Date and place of birth, Nationality, Passport details**

Date of birth	
Place of birth	
Nationality	
Passport issued by	
Passport number	

**A7. Tax residence and domicile**

Country of tax residence	
Domicile (if different)	

**A8. Marital status**

Marital status	
Spouse / Partner details	

**Interested Party Questionnaire : Individual**

**A9. Children and other dependents (including contact details, if appropriate)**

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**A10. Identification documents of the interested party \***

Attach a copy of:	Passport or Identity card (current)	<input type="checkbox"/>
	Utility bill (not more than 6 months old) showing the current residential address	<input type="checkbox"/>

\* Copies should be authenticated by a notary or other person of professional recognition, unless the original documents are shown to Cogent.

**A11. References**

Please provide the name and address of two parties who are able to provide references (eg. accountant, lawyer, banker or other recognised professional intermediary) and complete the authorities at pages 4 and 5

**B: BACKGROUND**

**B1. Business activities**

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**B2. Has the interested party ever been convicted of a criminal offence anywhere in the world?**

NO <input type="checkbox"/>	YES (Please provide details below) <input type="checkbox"/>

**B3. Has the interested party ever been subject to a tax investigation by any authority?**

NO <input type="checkbox"/>	YES (Please provide details below) <input type="checkbox"/>

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**B4. Are there any known present or future creditors who have any claims against the interested party?**

NO <input type="checkbox"/>	YES (Please provide details below) <input type="checkbox"/>

**B5. Is the interested party a PEP (Politically Exposed Person)?**

NO <input type="checkbox"/>	YES (Please provide details below) <input type="checkbox"/>

**C: MISCELLANEOUS**

**Please provide any further information that should be brought to our attention in relation to the proposed business**

**D: EXECUTION**

- (a) I certify that the information supplied by me and contained herein is true and accurate and I will advise you of any material changes
- (b) I confirm that the source or origin of any further assets that may be introduced to you will be explained prior to transfer
- (c) I understand that Cogent recommends professional, legal and tax advice should be expressly obtained concerning my financial affairs and that Cogent cannot provide any such advice and cannot be held responsible for any advice expressly obtained or advice not sought by me or any or all related persons party to the affairs of the proposed structure

Interested Party to sign	Date

**Interested Party Questionnaire : Individual**

**Authorisation to request a Bank Reference**

*Private and confidential enquiry to:*

**Bank name**

**Bank address**

**Account name**

**Account number**

**IBAN number (if known)**

**Bank sort code (if known)**

**Bank SWIFT code (if known)**

<input type="text"/>	<input type="text"/>
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**Enquiry from:**

Cogent Limited, PO Box 409, Sarnia House, Le Truchot, St Peter Port, Guernsey, GY1 3WA

**Information required:**

We request your opinion as to the standing, integrity and respectability of the person named below for the purpose of providing professional, corporate, trustee services or otherwise

Name

Address

Please also confirm that the residential address and signature provided corresponds to your records and that the account relationship has been maintained for at least two years during which time all dealings have been conducted satisfactorily

The undersigned hereby consents to you providing a reference to Cogent Limited and confirming the information requested

Interested Party to sign	Date

**Interested Party Questionnaire : Individual**

**Authorisation to request a Reference from a Professional Adviser**

*Private and confidential enquiry to:*

**Name of Referee**

**Address of Referee**

**Profession of Referee**

**Enquiry from:**

Cogent Limited, PO Box 409, Sarnia House, Le Truchot, St Peter Port, Guernsey, GY1 3WA

**Information required:**

We request your opinion as to the standing, integrity and respectability of the person named below for the purpose of providing professional, corporate, trustee services or otherwise

**Name**

**Address**

Please also confirm that the residential address and signature provided corresponds to your records and that you have known the person named above for at least two years during which time all dealings have been conducted satisfactorily

The undersigned hereby consents to you providing a reference to Cogent Limited and confirming the information requested

Interested Party to sign	Date