

ESTABLISHMENT AND VERIFICATION OF IDENTITY FORMS**Financial Intelligence Centre Act, 38 of 2001****Form: Establish and verify the identities of natural persons who are South African citizens or residents of South Africa****Information required:**

Full names: _____

Date of birth: _____

Identity Number: _____

Residential address: _____

Income tax registration number: _____

Source of Income: _____

Source of funds to be used: _____

If the person referred to above is represented by a guardian or a curator the following information must also be obtained in respect of such guardian or curator:

Full names: _____

Date of birth: _____

Identity Number: _____

Residential address: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Verification steps

- Obtain the identity document, or a similar document (such as a valid passport; or a driver's license; or a valid temporary identity document), bearing a photograph of the person concerned and his/her full names, date of birth and identity number, and compare the details recorded above with the particulars stated in that document.
- Take all reasonable steps necessary to verify the residential address of the person with a document detailing the name, surname and the residential address of the person concerned, such as a utility bill (less than 3 months old) e.g. a municipal rates and taxes invoice or a telephone invoice.
- An official document issued by SARS, e.g. the latest tax return / provisional tax return

- Make a copy of the documents above for record purposes.
- Proof of Banking Details
- Confirm that these steps have been complied with.

Additional information

SAFEX Client agreement completed: _____

Name of the person obtaining the information: _____

Verified by Futures Administrator: _____ Date: _____

Verified by MLCO: _____ Date: _____

Financial Intelligence Centre Act, 38 of 2001

Form: Establish and verify the identities of natural persons who are citizens or residents of a country other than South Africa

Information required

Full names: _____

Date of birth: _____

Nationality: _____

Passport number: _____

Residential address: _____

Source of Income: _____

Source of funds to be used: _____

If the person referred to above is represented by a guardian or a curator the following information must also be obtained in respect of such guardian or curator:

Full names: _____

Date of birth: _____

Nationality: _____

Identity Number: _____

Residential address: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Verification steps

- Obtain the passport and compare the details recorded above with the particulars stated in the passport.
- Make a copy of the passport to be retained for record purposes.
- Proof of Banking Details
- Confirm that these steps have been complied with.

Additional information

SAFEX Client agreement completed: _____

Name of the person obtaining the information: _____

Handed to the Futures Administrator: _____ Date: _____

Handed to MLCO: _____ Date: _____

Verified by the Futures Administrator: _____ Date: _____

Verified by MLCO: _____ Date: _____

Financial Intelligence Centre Act, 38 of 2001

Form: Establish and verify the identity of a close corporation

Information required from the person acting for the close corporation

Registered name of close corporation: _____

Registration number: _____

Registered address: _____

Trade name of the close corporation (if any): _____

Address from which the close corporation operates: _____

Details of each member of the close corporation (add additional sheets if necessary)

Member

Full names: _____

Date of birth: _____

Identity Number: _____

Income tax registration number: _____

Nationality if not a South African citizen: _____

Residential address: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Member

Full names: _____

Date of birth: _____

Identity Number: _____

Income tax registration number: _____

Nationality if not a South African citizen: _____

Residential address: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Details of each natural person acting on behalf of the close corporation:

Full names: _____

Date of birth: _____

Identity Number: _____

Income tax registration number: _____

Nationality if not a South African citizen: _____

Residential address: _____

Contact particulars: (Tel) _____ (fax) _____ (e-mail) _____

Source of Income: _____

Source of funds to be used: _____

Verification steps

Obtain the following documents and compare the details recorded above with the particulars stated in the documents:

- the most recent Founding Statement and Certificate of Incorporation (CK1) or, where applicable, the Amended Founding Statement (CK2), issued by CIPRO (now CIPC) and signed by an authorised member/employee of the close corporation;
- the identity document of each member of the close corporation or a similar document bearing a photograph of the member concerned and his/her full names, date of birth and identity number;
- the identity document of each person acting on behalf of the close corporation member or a similar document bearing a photograph of the person concerned and his/her full names, date of birth and identity number;
- take all reasonable steps necessary or required to verify the trade name and/or business address, or addresses, of the close corporation (not older than 3 months);
- obtain reliable proof that the person representing the close corporation is authorised to act on behalf of the close corporation such as, for instance, a duly signed resolution of the close corporation or a letter of authorization signed for and on behalf of the close corporation;
- An official document issued by SARS, e.g. the latest tax return / provisional tax return;
- Make a copy of the various document referred to above to be retained for record purposes.
- Proof of Banking Details
- Confirm that these steps have been complied with.

Additional information

SAFEX Client agreement completed: _____

Name of the person obtaining the information: _____

Financial Intelligence Centre Act, 38 of 2001

Form: Establish and verify the identity of a partnership

Information required from the person acting for the partnership

Name of partnership: _____

Details of each partner in the partnership (use such additional sheets as may be necessary):

Partner

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Partner

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Details of the person exercising effective control over the partnership:

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Details of each natural person acting for the partnership:

Full name: _____

Date of birth: _____

Identity Number: _____

Nationality if not a South African citizen: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Source of Income: _____

Source of funds to be used: _____

Verification steps

Obtain the following documents (as applicable) in respect of each partner and each person mentioned above and compare the details recorded above with the particulars stated in the documents:

- Natural person: ID document
- Close corporation: Most recent founding statement (CK1 and CK2)
- SA company: Most recent forms CM1, CM22 and CM29 or CoR14.3, CoR21.1 and CoR39
- Foreign company: Official incorporation documents
- Partnership: Partnership agreement
- Other legal entity: Constitution or other founding document
- Take all reasonable steps necessary or required to verify the trade name and/or business address, or addresses, of the legal entities mentioned above (not older than 3 months);
- Compare the partnership name with the partnership agreement;
- An official document issued by SARS, e.g. the latest tax return / provisional tax return
- Make a copy of the various document referred to above to be retained for record purposes.

- Proof of Banking Details
- Confirm that these steps have been complied with.

Additional information

SAFEX Client agreement completed: _____

Name of the person obtaining the information: _____

Verified by the Futures Administrator: _____ Date: _____

Verified by MLCO: _____ Date: _____

Financial Intelligence Centre Act, 38 of 2001

Form: Establish and verify the identity of a trust

Information required from the person acting for the trust

Name of trust: _____

Registration number of Trust: _____

Income tax registration number: _____

Address of office of Master of High Court where Trust is registered: _____

Details of each trustee of the trust (use such additional sheets as may be necessary):

Trustee

Full names/Registered name: _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Income tax registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Trustee

Full names/Registered name: _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Income tax registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Founder

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Income tax registration number: _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Beneficiaries determined by _____

Beneficiary

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Beneficiary

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Beneficiary

Full names/Registered name: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

Trade name (Legal entity): _____

Date of birth (natural person): _____

Identity Number/Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Details of each natural person acting for the Trust:

Full name: _____

Date of birth: _____

Identity Number: _____

Nationality if not a South African citizen: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Source of Income: _____

Source of funds to be used: _____

Verification steps

Obtain the following documents (as applicable) in respect of the trust, each trustee and each person mentioned above and compare the details recorded above with the particulars stated in the documents:

- the most recent Trust Deed registered with the relevant Master of the High Court
- most recent letter of authority issued by the Master of the High Court

- the identity document of each trustee of the trust or a similar document bearing a photograph of the trustee concerned and his/her full names, date of birth and identity number;
- the identity document of each person acting on behalf of the trust or a similar document bearing a photograph of the person concerned and his/her full names, date of birth and identity number;
- the identity document of the founder of the trust or a similar document bearing a photograph of the founder and his/her full names, date of birth and identity number;
- the identity document of each beneficiary of the trust or a similar document bearing a photograph of the beneficiary concerned and his/her full names, date of birth and identity number;
- take all reasonable steps necessary or required to verify the trade name and/or business address, or addresses, of the trust (not older than 3 months);
- obtain reliable proof that the person representing the trust is authorised to act on behalf of the trust such as, for instance, a resolution of the trustees;
- An official document issued by SARS, e.g. the latest tax return / provisional tax return
- Make a copy of the various document referred to above to be retained for record purposes.
- Make a copy of the various document referred to above to be retained for record purposes.
- Proof of Banking Details
- Confirm that these steps have been complied with.

Additional information

SAFEX Client agreement completed: _____

Name of the person obtaining the information: _____

Verified by the Futures Administrator: _____ Date: _____

Verified by MLCO: _____ Date: _____

Financial Intelligence Centre Act, 38 of 2001

Form: Establish and verify the identity of a South African company

Information required from the person acting for a company

Registered name of company: _____

Registration number: _____

Registered address: _____

Name under which the company conducts business: _____

Address from which the company operates: _____

*** Details of person authorised to act on behalf of the company:**

Full names: _____

Date of birth: _____

Identity Number: _____

Nationality if not a South African citizen: _____

Residential address: _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Source of Income: _____

Source of funds to be used: _____

Details of person and legal entities holding 25% or more voting rights in the company:

Full names: _____

Date of birth: _____

Identity Number: _____

Nationality if not a South African citizen: _____

Residential address: _____

Legal form of legal entity (if neither a company nor a close corporation): _____

*Please send
confirmation
if N/A*

Trade name (Legal entity): _____

Registration number: _____

Nationality if not a South African citizen: _____

Registered address (legal entity): _____

Business address (legal entity): _____

Contact particulars: (Tel) _____ (Fax) _____ (e-mail) _____

Verification steps

Obtain the following documents and compare the details recorded above with the particulars stated in the documents:

- the most recent Certificate of Incorporation (CM1) and Notice of Registered Office and Postal Address (CM22) and Register of Directors and Officers issued by CIPC (CM29);
- If incorporated under Companies Act 71 of 2008, the most recent Registration Certificate (CoR 14.3), Notice of Registered Office and Postal Address (CoR21.1) and Register of Directors and Officers (CoR39) issued by CIPC;
- the identity document of each director of the company or a similar document bearing a photograph of the manager concerned and his/her full names, date of birth and identity number;
- the identity document of each person acting on behalf of the company or a similar document bearing a photograph of the person concerned and his/her full names, date of birth and identity number;
- * • take all reasonable steps necessary or required to verify the trade name and/or business address, or addresses, of the company (not older than 3 months);
- * • obtain reliable proof that the person representing the company is authorised to act on behalf of the company such as, for instance, a resolution of the company duly signed by the company secretary or a letter of authorization signed for and on behalf of the company;
- * • An official document issued by SARS, e.g. the latest tax return / provisional tax return
 - Make a copy of the various document referred to above to be retained for record purposes.
- * • Proof of Banking Details
 - Confirm that these steps have been complied with.

Additional information

SAFEX Client agreement completed: _____

Name of the person obtaining the information: _____

Verified by the Futures Administrator: _____ Date: _____

Verified by MLCO: _____ Date: _____