

Confirmation of Verification of Identity Certificate

Introduction by an FCA Regulated Firm

Please complete this certificate to confirm your client's identity. This is required by us to meet anti money laundering requirements.

Important Information

- A separate certificate must be completed for each client (e.g. joint holders, trustee cases and joint life cases). If the payments for the client are being made by a third party, the identity of that person must also be verified and confirmation provided in a separate certificate.
- This certificate cannot be used to verify the identity of any client that falls into one of the following categories:
 - those who are exempt from verification as being an existing client of the introducing firm prior to the introduction of the requirement for such verification;
 - those who have been subject to Simplified Due Diligence under the Money Laundering Regulations; or
 - those whose identity has been verified using the source of funds as evidence.
- This certificate must carry an original signature.
- We reserve the right to request a copy of the evidence you use to verify the identity of your client.

If you are using this form to verify the identity of a private individual, complete Parts A and C only.

If you are using this form to verify the identity of a non private individual, complete Parts B and C only.

Part A Private Individual

Name of individual	<input type="text"/>	Individual's previous address*	<input type="text"/>
Individual's current address	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>	Postcode	<input type="text"/>
Postcode	<input type="text"/>		
Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

*Only complete if the individual has changed address in the last three months.

Part B Non Private Individual

Full name of client	<input type="text"/>	Registered number (if any, or if appropriate)	<input type="text"/>
Type of entity (corporate, trust etc)	<input type="text"/>	Relevant company registry* or regulated market listing authority	<input type="text"/>
Location of business (full operating address)	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>	Names of directors (or equivalent)	<input type="text"/>
			<input type="text"/>
Registered office in country of incorporation	<input type="text"/>		<input type="text"/>
	<input type="text"/>	Names of principal beneficial owners (over 25%)	<input type="text"/>
	<input type="text"/>		<input type="text"/>
Postcode	<input type="text"/>		<input type="text"/>

*Relevant company registry includes other registers, such as those maintained by charity commissions (or equivalent) or chambers of commerce.

Dates of birth if known

Part C Confirmation

I/We confirm that the information completed in Part A or Part B was obtained by me/us in relation to the client.

Please mark **x** in one box only:

- The evidence I/we have obtained meets the standard requirements which are defined within the guidance for the UK Financial Sector issued by Joint Money Laundering Steering Group (JMLSG); or
- The evidence I/we have obtained exceeds the standard requirements and I/we have attached the further evidence I/we used to verify the identity of my/our client to this form.

Firm Name

FCA Firm Reference Number

Registered Individual (RI)

FCA Individual Reference Number

Authorised Signature (must be signed by the RI)

Date

 / /
