

# Personal Declaration Form for Beneficial Owners/Shareholder Controllers

*(For the purpose of this form “beneficial owners” shall have the meaning set out in the Companies Act 1981 or Exchange Control Regulations 1973, the Partnership Act 1902 and Limited Liability Company Act 2016 and “shareholder controllers” the meaning set out in the relevant “Regulatory Act” defined below).*

A separate declaration form must be completed and signed by each person proposing to be a beneficial owner or shareholder controller in a Bermuda entity. For Partnerships, the beneficial owner and/or the General Partner (if a natural person) must complete the declaration form. For Trusts, the Settlor, Protector, Beneficiary, Trustee or any other natural person exercising control over the Trust must complete the declaration Form.

## Personal information

<b>Surname:</b>			
<b>Complete forename(s):</b>		<i>As appears on Government Issued ID or Passport</i>	
<b>Name generally used:</b>			
<b>Any previous name(s):</b>		<i>If relevant, please provide name change from and to, include place of change</i>	
<b>Date of birth:</b> <small>(DD/MM/YY)</small>		<b>Gender:</b>	
<b>Place of birth:</b>	<b>City:</b>	<b>Country:</b>	
<b>Current residential address:</b> <i>P.O. Box <u>not</u> acceptable</i>			
<b>Previous residential addresses:</b> Past three (3) years			
<b>Country of citizenship:</b>		<i>If more than one citizenship is held please list all</i>	
<b>Previous citizenship(s):</b>		<i>List all, and provide date of renunciation for each</i>	

## Employment details

*If retired please provide details of your last occupation.*

<b>Present employer:</b>	
<b>Occupation:</b>	

## Passport details

*If you have multiple passports, please list details for all of them (use the Additional Information box, if needed).*

<b>Passport number:</b>	<b>Issue date:</b> <small>(DD/MMM/YYYY)</small>	<b>Expiry date:</b> <small>(DD/MMM/YYYY)</small>
<b>Place of issue:</b>	<b>Country of issue:</b>	
<b>Passport number:</b>	<b>Issue date:</b> <small>(DD/MMM/YYYY)</small>	<b>Expiry date:</b> <small>(DD/MMM/YYYY)</small>
<b>Place of issue:</b>	<b>Country of issue:</b>	

## Information about spouse or partner

Name of spouse/partner:		
Date of birth:	(DD/MM/YY)	Country of citizenship:
Place of birth:	City:	Country:
Address of spouse/partner: <i>P.O. Box <u>not</u> acceptable</i>		

## Declaration

If the answer is yes to any of the following questions, please provide details in the additional information box below.

1	Do you have any interest in any company or partnership registered or formed in Bermuda?	Yes	No
2	Have you ever been refused consent to register a company or form a partnership in Bermuda or elsewhere?	Yes	No
3	Are you or have you ever been an undischarged bankrupt?	Yes	No
4	Are or have you (or a company in which you hold/held an interest) at any time been the subject of any criminal/civil investigations and/or proceedings and/or litigation?	Yes	No
5	Have you (or a company in which you hold/held an interest) at any time been found in breach of regulations or convicted of any offence, criminal or otherwise, by any Tribunal or court (including convictions under appeal, any formal notification of investigation or committal for trial)?	Yes	No
6	Have you (or a company in which you hold/held an interest) ever been the subject of a judicial or another official enquiry/investigation for fraud or dishonesty or has fraud or dishonesty been proven against you in any civil proceedings?	Yes	No
7	Have you (or a company in which you hold/held an interest) ever been subject to an investigation (whether current or previous) or are you aware of any action that might be taken against you (or a company in which you hold/held an interest) by a governmental body, public authority, professional or other regulatory body or have you ever resigned a professional post whilst under investigation?	Yes	No
8	Are you a member in good standing of a self-regulatory organisation(s) or professional body? If yes, name the organisation(s) or professional body:	Yes	No
	<b>8a.</b> Have you ever been censured or disqualified by a professional body?	Yes	No
	<b>8b.</b> Have you ever been the subject of an investigation, pending proceeding or other enquiry by a self-regulatory organization or professional body of which you are or were a member?	Yes	No
9	Have you (or a company in which you hold/held an interest) ever been refused or had a licence, permit or other authorisation revoked or regulatory action taken against you in any jurisdiction or have you been fined or subject to enforcement actions imposed by a regulator? <b>9a.</b> If yes, name the organisation(s), provide dates and relevant facts including decisions.	Yes	No

**Politically Exposed Person (“PEP”)**

Politically Exposed Person has the meaning assigned to it in regulation 11(5) of the Proceeds of Crime (Anti-Money Laundering and Anti-Terrorist Financing) Regulations 2008 (the “Regulations”).

“Immediate family member” has the meaning given in paragraph 2 of the Schedule to the Regulations.

<b>10</b>	<p>Have you or an “immediate family member” or a close associate, ever been a PEP?</p> <p><b>10a.</b> If yes, please provide details by selecting the appropriate PEP category:</p> <p><b>10b.</b> If a PEP, please specify your role that classified you as a PEP:</p> <p><b>10c.</b> If a family member or a close associate of a PEP, please specify the family relationship and/or the nature of the association:</p>	<p>Yes    No</p>
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**Signature**

I hereby certify that the information in this Declaration is true, accurate and complete to the best of my knowledge and belief.

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
(DD/MM/YY)

**Corporate Services Provider to complete**  
*(Authorised representative of Corporate Services Provider)*

Due to the individual’s PEP (or former PEP) status, we confirm that the we have conducted enhanced due diligence, during which we have satisfied ourselves concerning their source of wealth.

Corporate Service Provider: \_\_\_\_\_

Authorised Representative’s Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
(DD/MM/YY)

**Additional information:** (If the information exceeds the word limit of this box, please add an additional page as needed)

**Note:** A completed Personal Declaration remains valid for three (3) years from the date it is signed.

**“Regulatory Acts”** mean the Insurance Act 1978, Banks and Deposit Companies Act 1999, the Trusts (Regulation of Trust Business) Act 2001, Investment Business Act 2003, Investment Funds Act 2006, Money Services Business Act 2016, Digital Asset Business Act 2018, Fund Administration Business Provider Act 2019 and Digital Asset Issuance Act 2019.