



Non-bank documents provided will be returned after scanning

<b>Individuals (single, joint)</b>	<b>Req'd</b>	<b>May be Req'd</b>
[check to indicate documents provided]		
<input type="checkbox"/> Customer Record Card	X	
<input type="checkbox"/> Personal Identification + copies of all documents [certified if originals not provided]	X	
<input type="checkbox"/> Ownership Declaration		X
<input type="checkbox"/> Initial Due Diligence for each account to be opened		X
<b>Company (local, community, international, overseas)</b>		
[check to indicate documents provided]		
<input type="checkbox"/> Customer Record Card	X	
<input type="checkbox"/> Copy of Memorandum & Articles of Association/Constitution	X	
<input type="checkbox"/> Copy of Certificate of Incorporation	X	
<input type="checkbox"/> Minutes of directors meeting authorising relationship with NBV [+who to sign & how]	X	
<input type="checkbox"/> Ownership Declaration [declaration of who the ultimate beneficial owners are (ie final individuals who receive benefit of ownership) – holdings of >10%]	X	
<input type="checkbox"/> Evidence of share ownership [eg company search, VSFC extract]		X
<input type="checkbox"/> VIPA approval	X	
<input type="checkbox"/> Confirmation of director names [eg company search, VSFC extract]	X	
<input type="checkbox"/> Copy of registration of business name		X
<input type="checkbox"/> Current business license		X
<input type="checkbox"/> Statement signed by a director explaining nature of the company's business, reason for its existence, expected turnover, customer base, source of funds	X	
<input type="checkbox"/> Initial Due Diligence for each to be opened		
<input type="checkbox"/> Personal Identification for all directors/secretary/signatories + copies of all documents [certified if originals not provided]	X	
<b>Organisations (formally set-up, charitable association)</b>		
[check to indicate documents provided]		
<input type="checkbox"/> Customer Record Card	X	
<input type="checkbox"/> Copy of Constitution/Rules/Objectives	X	
<input type="checkbox"/> Certificate of Association	X	
<input type="checkbox"/> Minutes of meeting authorising relationship with NBV [+who to sign & how]	X	
<input type="checkbox"/> Ownership Declaration [declaration of who the ultimate beneficial owners are (ie final individuals who receive benefit of ownership) – holdings of >10%]		X
<input type="checkbox"/> Personal Identification for all office bearers/signatories + copies of all documents [certified if originals not provided]	X	
<b>Cooperative Society</b>		
[check to indicate documents provided]		
<input type="checkbox"/> Customer Record Card	X	
<input type="checkbox"/> Copy of By-Laws provided to Registrar of Cooperatives	X	
<input type="checkbox"/> Certificate of Registration	X	
<input type="checkbox"/> Minutes of meeting authorising relationship with NBV [+who to sign & how]	X	
<input type="checkbox"/> Ownership Declaration [declaration of who the ultimate beneficial owners are (ie final individuals who receive benefit of ownership) – holdings of >10%]		X
<input type="checkbox"/> Personal Identification for all office bearers/signatories + copies of all documents [certified if originals not provided]	X	
<b>Trusts (Individual or company) Company trustee to meet Company req'ments</b>		
[check to indicate documents provided]		
<input type="checkbox"/> Customer Record Card	X	
<input type="checkbox"/> Copy of trust deed	X	
<input type="checkbox"/> Ownership Declaration [declaration of who the ultimate beneficial owners are (ie final individuals who receive benefit of ownership) – holdings of >10%]	X	
<input type="checkbox"/> Statement signed by trustee explaining nature of the trust, reason for its existence, expected turnover, source of funds	X	



**PERSONAL IDENTIFICATION**

Date

Person's name

Preference is for all photo IDs. If not available then combination of photo + non-photo

**Type of identification method used** (place x in relevant box)

- Category 1 (at least 1 x photo + 1 x non-photo IDs)
- Category 2 (3 x non-photo IDs)
- Category 3 (3 x written references)

Reason why Category 1 ID not available

**Photo ID** (place x in relevant box)

- |   |  |
|---|--|
| <input type="checkbox"/> Current passport (all countries) | <input type="checkbox"/> Current driver's license (all countries)  |
| <input type="checkbox"/> Student photo identity card      | <input type="checkbox"/> VNPF/superannuation photo membership card |
| <input type="checkbox"/> Government photo identity card   | <input type="checkbox"/> Vanuatu Firearms license                  |
| <input type="checkbox"/> Employee photo identity card     | <input type="checkbox"/>   |

**Non Photo ID** (place x in relevant box)

- |  |  |
|--|--|
| <input type="checkbox"/> Educational institution certificate | <input type="checkbox"/> Government health care card                 |
| <input type="checkbox"/> Citizenship certificate             | <input type="checkbox"/> Electricity/telephone account               |
| <input type="checkbox"/> Birth certificate                   | <input type="checkbox"/> Debit card/credit card/bank statement       |
| <input type="checkbox"/> Marriage certificate                | <input type="checkbox"/> Vanuatu work permit/Visa                    |
| <input type="checkbox"/> Employee identity card              | <input type="checkbox"/> License/permit issued by Vanuatu Government |
| <input type="checkbox"/> Employee pay advice                 | <input type="checkbox"/> Foreign pension card                        |
| <input type="checkbox"/> Professional/trade member records   | <input type="checkbox"/> Other official Govt documents               |
| <input type="checkbox"/> Employment records                  |  |

Persons signature (compare to ID document)

**Written Reference** (place x in box)

- Acceptable referee declaration from 3 referees

Identification satisfactory:

Branch manager

Date

Signature



## OWNERSHIP DECLARATION

Date

Customer Name

**Customer Present Declaration** (cross X where appropriate)

**Individual/Joint Customer**

I/We the undersigned declare that:

- I/We am/are the beneficial owner(s) of the funds deposited with the bank OR
- the beneficial owner(s) of the funds deposited with the bank is/are as below:

**Company/Trust/Association/etc**

I/We the undersigned declare that I/we are representatives of the customer & that I/we are authorised on behalf of the customer & its beneficial owners to make this declaration.

- the beneficial owner(s) of the funds deposited with the bank is/are as below OR
- there are no individuals who ultimately own or control the rights to, or benefits from the entity, that own 10% or more of the entity

**Beneficiaries**

Full Name	Current Address	Interest %
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>

**Declaration**

Full Name	Signature	Address (or office location)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

**Customer Not Present Statutory Declaration**

I  of

do solemnly declare:

I am duly authorised on behalf of the customer and the beneficial owners to make this declaration and to execute on behalf of the customer all such documents as the Bank requires in connection with establishing a banking relationship and I have produced evidence of such authority to the Bank

The beneficial owner(s) of the funds deposited with the bank is/are:

Full Name	Current Address	Interest %
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 20%;" type="text"/>

I am satisfied that upon making due enquiry of each of the beneficial owners that any funds deposited with the Bank are not derived from nor are proceeds of any forms of unlawful activity whatsoever, nor have they been obtained in any manner contrary to the laws of the country from where they came or any other relevant country.

I make this solemn declaration conscientiously believing the same to be true and by virtue of the *Statutory Declarations Act 1835 (UK)*

Declared at  Place this  Day day of  Month  Year  
Before  
 Declarant

*Commissioner of Oaths/Notary Public*



## INITIAL DUE DILIGENCE

Date

*Form required for each account*

The Bank has responsibilities under the AML-CTF Act (2014) to have knowledge of its customers and their banking transactions. Detailed responses to the information requested below are required. If responses are not satisfactory an account will not be opened.

Account name

Account Number

**1. Initial funds**

Deposit amount

Where are funds from ?  
(source of funds)

Form of deposit

- Cash                       Inward transfer  
 Bank draft                 Other – specify below

**2. Acquisition of funds**

How have the funds been acquired? (source of wealth)  
Funds generated by what type of business activity?

**Use of funds (cont'd)**

If account for business purposes provide information as to type of business, expected turnover, etc

How long will funds in account stay in Vanuatu ?

Specify length of time (eg 6 months or 10 years)

Days     Months

Weeks     Years

If less than 1 year, where will funds be transferred to?

**3. Beneficial owner(s) of funds**

Are you the ultimate owner of the funds?

- Yes     No

If not, then who is the ultimate owner ?

**4. Current banker(s)**

Your bank name, address & contact details

Can we obtain banker's opinion?     Yes     No

**6. Future deposits into account**

Expected deposit amnts

Frequency of deposits

Which countries will be the likely sources of funds?

Do you anticipate making regular and/or frequent **cash** deposits of more than US\$5,000 (or foreign equivalent) ? *(Please ✓ tick where appropriate)*

Yes    Where will the cash come from ?

No   

**5. Use of funds**

Why is the account being opened ?

What will funds in the account be used for ?

**7. Signature(s)**



### NEW/EXISTING CUSTOMER DATA – PERSON

Date

*Form required for each non person*

Existing customer number

#### Details

- 1. Branch
- 2. First name
- 3. Middle name
- 4. Surname
- 5. Title
- 6. Alias
- 7. Date of birth
- 8. Gender
- 9. Foreigner Yes  No
- 10. Country of origin (only if foreigner)
- 11. Non resident Yes  No
- 12. Country of residence (only if non res)
- 13. Domicile

#### Residential address details

- 14. Country
- 15. Town
- 16. Village/Island
- 17. Address
- 18. Mobile no

#### Risk classification (bank use)

- 19. Risk grade

#### Other details

- 20. Occupation
- 21. Employer
- 22. Job position

#### More contact details

- 23. Type of address
- 24. Country
- 25. Town
- 26. Village/Island
- 27. Address
- 28. Work phone
- 29. Home phone
- 30. Mobile phone
- 31. Email address

#### Expected relationship with bank

- 32. Products/Services
- 33. Relationship

#### Type & behaviour (bank use)

- 34. PEP
- 31. Business large cash amounts
- 32. Complex business ownership structure

#### Account details

- 33. Account name
- 34. Product (bank code only)
- 35. Industry code (bank use)
- 36. Statement cycle
- 37. No of signatories
- 38. Method of operation



## EMAIL & TELEFAX/FACSIMILE INDEMNITY FORM

Date

The Manager  
National Bank of Vanuatu Limited  
PO Box 249  
Port Vila  
Vanuatu

### EMAIL & TELEFAX/FACSIMILE WAIVER - INDEMNITY

I/We

1	<input type="text"/>	(Account name(s))
2	<input type="text"/>	
3	<input type="text"/>	

the undersigned customer(s) wish to be in a position to provide the National Bank of Vanuatu Ltd ("the Bank") with instructions by email or telefax/facsimile with or without prior or subsequent written confirmation.

I/We, therefore discharge, indemnify and hold harmless the Bank and its staff from any responsibility for any error in transmission, wrong interpretation or duplication of instructions received by the Bank by email or telefax/facsimile and consider valid all messages the Bank receives under my/our name.

Any damage arising from the use of email, telefax/facsimile or any other type of transmission system, particularly with regard to loss, delay, misunderstanding, garbled message or duplications, shall be borne by the undersigned customer(s).

The Bank shall in no case be held liable for having acted upon email or telefax/facsimile instructions purported to be from the customer(s) but provided to the Bank by any unauthorised party.

Your communications shall be deemed to be effective when the Bank actually receives them in a legible form, and all instructions and communications forwarded by email, if legible, shall have the same validity, admissibility and enforceability as if signed in writing.

Signature(s)

1	<input type="text"/>
2	<input type="text"/>
3	<input type="text"/>



**SIGNATURES**  
**Method of Operation**

- Any to sign (any one of the authorised signatories without the permission of the others)
- All to sign (all authorised signatories must sign)
- Any two to sign (any two of the authorised signatories can sign without the permission of the others)
- Other (special requirement eg Director & Secretary, any two Directors, etc)

Account No.

Only complete if signature section different to other accounts

**Signatories**

A	Initials & Surname	B	Initials & Surname
	Position		Position
C	Initials & Surname	D	Initials & Surname
	Position		Position
E	Initials & Surname	F	Initials & Surname
	Position		Position

**Third Parties**

G	Initials & Surname	Start Date	Cancellation
	Position	Finish date	Diary <input type="checkbox"/> Done <input type="checkbox"/>
H	Initials & Surname	Start Date	Cancellation
	Position	Finish Date	Diary <input type="checkbox"/> Done <input type="checkbox"/>

**Special Instructions**



Filing Name - Surname first

Main Card

Customer Name

Account Card

Personal - SURNAME last & in capitals  
Non Personal - all in capitals

Date (eg. 15022013)

Customer Number

Risk Classification  Ind Code

**Non Urban Customers**

Village

Island

**Business/Company Only**

Type of business activity

**Clubs, Societies, etc Only**

	Yes	No	N/A
Written constitution held	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minutes held	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

All	Yes	No	N/A
Customer Identification form(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ownership Declaration form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Due Diligence form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fax/Email Indemnity form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No	N/A
Company Rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Searches held	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cert of Incorp held	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VIPA cert held	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registration of Business Name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resolution (to open & sign)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Authorisation**

Manager /OIC/Supervisor  
Have all required documents been received?

I certify that signatories have been satisfactory identified and all relevant sections of this card have been completed correctly.

Name	Signature	Date
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**NOTICE OF AUTHORITY TO TRANSACT BANKING BUSINESS**

To: National Bank of Vanuatu Limited (Bank)  
In relation to the account(s) on the other side of this card:

Date

(tick those applicable)

**Company**

Memorandum/Articles of Association/Constitution/Cert of Incorp/VIPA cert/Resolution have already been provided  Documents are provided now

**Organisation (club, society, etc)**

Constitution/By-laws/Rules/Resolution have already been provided  Documents are provided now

We have no written Constitution/By-laws/Rules but operate on minutes passed from time to time and this notice of authority conforms with the minutes.

Authority is given to the persons whose signatures appear on the other side of this card subject to the specified method of operation to:

**All customers**

1. sign, draw, make, accept, endorse, discount or make arrangements with the Bank regarding cheques, withdrawals, bills of exchange, bank cheques, standing order payment/debit authorities, orders and other instruments and electronic banking services, and to overdraw the account(s) to any extent permitted by the Bank.
2. lodge/receive boxes, packets, deeds or documents.
3. endorse, assign or give the Bank security over bills of lading, warehouse certificates and other documents conferring the right to or insuring goods and receive such documents and if required give trust receipts for same.
4. place monies on term deposit or any other deposit account and receive payment and interest and to give the Bank instructions regarding the disposal or renewal of such deposits.
5. have access to, demand of, and receive from the Bank and give instructions regarding an boxes, packets, deeds, bonds, deposits or other documents or property of any kind.
6. make arrangements with the Bank regarding the issue of letters of credit.
7. sign or execute documents, indemnities or declarations protecting the Bank in relation to 1) missing bills of lading or other documents conferring the right to or insuring goods, 2) guarantees or undertakings by the Bank in our favour or on our behalf, 3) letters of credit, 4) repurchase of bank/international cheques and other instruments by the Bank.
8. apply for encashment/negotiation facilities and letters of credit upon terms acceptable to the Bank including the giving and enforcing of security and relieving the Bank from liability and enter into contracts with the Bank for the sale or purchase of foreign currencies.

The Bank is authorised to deduct from the account(s) any applicable charges, interest or government charges/taxes payable by the Bank, relating to the use of the account(s), accept deposits credit and attend to collection of proceeds, and provide opinions for commercial enquires when required.

I/We agree to be bound by this authority and any separate terms and condition, if any, relating to this account issued by the Bank from time to time.

The Bank verifies identities by comparing signatures on documents with specimens lodged at the Bank. The Bank is authorised to restrict its control to this procedure but reserves the right to conduct a more thorough identity control. I/We discharge the Bank from any damage arising from deficient authority or non-discovering of forged signatures.

I/We acknowledge that if the Bank permits the account(s) to overdraw and the debt is not repaid within 90 days then default occurs and details of he debt and relevant personal details to allow identification may be provided to a credit bureau.

The Bank may, without notice, combine, consolidate, merge or apply any credit balance in any of your accounts (present or future), or any amount available to the Bank by way of set-off, lien or counterclaim, towards any of your debts with the Bank (present or future). The Bank's rights under this clause are in addition to any other rights it has at law or under any other agreement.

The Bank reserves the right to terminate its relationship at any time with immediate effect and any outstandings become immediately due for payment.

I/We agree and consent that the Bank may, without prior notice, use and disclose any of my/our information:

- to any outsourced provider, agent, contractor or advisor which the Bank engages to carry out its functions and activities.
- to anyone where the Bank considers it necessary so as to perform its duties and exercise its powers and rights.
- to any regulatory, supervisory or governmental authority in any country pursuant to any applicable law or regulation.
- to any credit bureau or debt collecting agency.
- to any insurer or guarantor (present or future).
- to other banks or financial institutions.
- as permitted by law.

I/We agree that the Bank may delay, block or refuse to process any transaction, without incurring liability if it suspects that:

- the transaction may breach laws or regulations in Vanuatu or any other country.
- the transaction may involve the proceeds of, or be applied to, conduct which is unlawful in Vanuatu or any other country.
- the transaction involves any person or entity that is sanctioned or connected to any person or entity that is sanctioned.

I/We agree to provide all information to the Bank that it requires to:

- manage its money-laundering, terrorism-financing or sanctions risk.
- complying with the laws of Vanuatu or any other country.
- comply with any applicable request, direction or requirement.

If the Bank, or its officers/employees suffer any loss/damage or incur any liability as a result of funds deposited with the Bank been proven or suspected of being derived from the proceeds of criminal activity, I/We agree to indemnify the parties against the loss/damage or liability.

This authority is to remain in force and the Bank may rely on it in all dealings, matters and transactions subject to any changes to the authority notified to the Bank in writing or until the Bank receives written revocation of the authority. All previous authorities are superseded by this document except for any liabilities not yet determined or instruments drawn or executed but not yet presented/paid.

**Joint customers (two or more individuals)**

1. the Bank is requested to accept for credit of account(s) cheques, bills of exchange or other instruments made payable to any one or more of us an in the event of the Bank permitting the account(s) to become overdrawn our liability to the Bank is joint and several.
2. balances in accounts are repayable and boxes, packets and double custody items are deliverable to the surviving party/parties.

**Signatures and titles of all authorising parties**

(Individuals: only need to sign as name is already on other side of form)  
(Company: Director & Secretary, or two Directors, or sole Director/sole secretary to sign)  
(Club/Society: Chairman/President & Secretary to sign)  
(Estate: All executors to sign)

Initials & Surname	Initials & Surname
Position	Position

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**Change of signatories**

I confirm that the change was approved at a legitimate meeting.

Previous office bearer  
(Chairman/President/ect)