

Customer Name				CIF Number	
Account Number		Branch		Country	

Use this form to complete the identification process for a Business Account. That is, a customer who wishes to open a Business Account for a company (domestic or foreign), trust, partnership, association, charity/non-profit or for a sole trader.

## Instructions

1. Original documents or certified copies must be sighted and relevant details recorded in this form. Photocopies of these documents must be stamped "original sighted & verified."
2. All sections (A to E) of this form must be completed.
3. Supervisor approval must be obtained prior to opening the account.

## Section A - Identifying and verifying individuals associated with the Business Account

All individuals associated with the Business account must be identified using the BSP - Customer Identification Form (Individual).

Tick all those applicable:

a. Principal owner(s), Beneficiaries and Shareholders with 10% or more interest in the organisation	<input type="checkbox"/> Yes
b. Sole Traders	<input type="checkbox"/> Yes
c. Directors, board members	<input type="checkbox"/> Yes
d. Partners	<input type="checkbox"/> Yes
e. Settlers, trustees, office bearers, principal members of the association/ proprietors (for associations)	<input type="checkbox"/> Yes
f. Account signatories, anyone acting on behalf of the business	<input type="checkbox"/> Yes

## Section B - Verifying business type details

You must collect adequate documents from the applicant to verify the following details:

<input type="checkbox"/> <b>Company</b> (Domestic or Foreign)	<p><b>Verify:</b> Name of company, date of registration/incorporation and registration/incorporation number (if applicable), address and purpose of business, names of principal owner(s) and shareholder(s), name of people authorised to act on behalf of the company.</p> <p>Please tick the documents used to verify the above:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Registration/Incorporation certificate</li> <li><input type="checkbox"/> Registration of Business Name certificate</li> <li><input type="checkbox"/> Register of directors, shareholders</li> <li><input type="checkbox"/> Business License/Municipal Business license certificate</li> <li><input type="checkbox"/> Change of Name certificate</li> <li><input type="checkbox"/> Documents detailing control body/Memorandum of Articles and/or Association</li> <li><input type="checkbox"/> Documents detailing address of principal place of business</li> <li><input type="checkbox"/> Documents authorising others to act on behalf of account</li> <li><input type="checkbox"/> Most recent annual return filed at Registrar of Companies (Samoa, Solomons, Vanuatu only)</li> <li><input type="checkbox"/> Other documents. Please specify: _____</li> </ul>
<input type="checkbox"/> <b>Trust</b>	<p><b>Verify:</b> Trust's name, address, purpose and control structure, names of trustees/settlers and beneficiaries.</p> <p>Please tick the documents used to verify the above:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Trust Deed/Trust Instrument</li> <li><input type="checkbox"/> Memorandum and articles of trust</li> <li><input type="checkbox"/> Trust charter, constitution</li> <li><input type="checkbox"/> Documents detailing address of principal place of business</li> <li><input type="checkbox"/> Documents authorising others to act on behalf of account</li> <li><input type="checkbox"/> Other documents. Please specify: _____</li> </ul>

<input type="checkbox"/> <b>Partnership/ association/ charity/ club/ non-profit organisation</b>	<p>Verify: name of business, registration number (if applicable), address, registration as non-profit, charter, constitution, partnership agreement or deed, authorisation for others to act on behalf of the account.</p> <p>Please tick the documents used to verify the above:</p> <div style="display: flex; flex-direction: column;"> <div><input type="checkbox"/> Registration/Incorporation certificate association</div> <div><input type="checkbox"/> Certificate of business partnership name</div> <div><input type="checkbox"/> Certificate of registration for non-profit organisation</div> <div><input type="checkbox"/> Documents verifying appointment of trustees/settlers and beneficiaries organisation</div> <div><input type="checkbox"/> Documents detailing address of principal place of business</div> <div><input type="checkbox"/> Documents authorising others to act on behalf of account</div> <div><input type="checkbox"/> Other documents. Please specify: _____</div> </div>
<input type="checkbox"/> <b>Sole Trader</b>	<div><input type="checkbox"/> A Bank South Pacific - Customer Identification Form (Individual) must be completed for those applying for a Sole Trader Business Account. For the purposes of FATCA, an individual SDF must be completed where required.</div>

Please ensure you sight the original or certified copy. Make photocopies of each document, stamp them "original sighted & verified" and scan or attach to this form.

### Section C - Customer Declaration

I/we declare that:

- a. all documents provided relating to the Business Account are true/genuine and have not been falsified in any way
- b. I/we have the proper authority to operate the account

Print name- Signatory (1)	Signature	Date
<div></div>	<div>X</div>	<div>/ /</div>
Print name- Signatory (2)	Signature	Date
<div></div>	<div>X</div>	<div>/ /</div>
Print name- Signatory (3)	Signature	Date
<div></div>	<div>X</div>	<div>/ /</div>

\* Attach another sheet if there are more than THREE (3) signatories to this Business Account

### Section D - Customer Declaration

I declare that:

- a. I have sighted all **original** documents and/or **certified** copies of documents.
- b. I have photocopied all documents provided, stamped them "original sighted & verified" and attached them to this form.
- c. I have completed, identified and verified all associated people to this account (Section A).
- d. I have collected a completed **Entity SDF**.

- ☐ Yes
- ☐ Yes
- ☐ Yes
- ☐ Yes

Account Opening Officer's name	Signature	Date
<div></div>	<div>X</div>	<div>/ /</div>

### Section E- Account Authorisation

Refer to supervisor for authorisation prior to opening this account.

Supervisor's name	Signature	Date
<div></div>	<div>X</div>	<div>/ /</div>