|  |  |
| --- | --- |
| KYC questionnaire |  |
| Renewal – legal entity -  | Date:       |

Arion bank is gathering the following information on the basis of measures against money laundering and terrorist financing. The information will not be used under any circumstances for marketing purposes.

|  |  |  |
| --- | --- | --- |
|       |  |       |
| **Company Name** |  | **Company – ID-No.**  |
|       |  |       |  |      /      |
| **Legal Address** |  | **Postcode**  |  | **City / Country** |
|       |  |      /       |
| **E-mail address** |  | **Telephone / Mobile** |

|  |
| --- |
| **What is the main activity of the entity?**       |
|  |
| **Is the company required to file a tax return in any country other than Iceland?** |
| [ ]  Yes | Country:       | Tax identification number (TIN):       |
|  |
| [ ]  No |

BOARD DIRECTORS

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

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|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

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|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

AUTHORIZED REPRESENTATIVES OR MANGAGING DIRECTORS AT THE COMPANY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

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| --- | --- |
| KYC questionnaire |  |
| Renewal – legal entity -  |  |

AUTHORIZED REPRESENTATIVES OR MANGAGING DIRECTORS AT THE COMPANY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **TIN / Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |  |
| E-mail |  | Mobile |  |  |
| Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |  |  |  |  |

ULTIMATE BENEFICIAL OWNERSHIP

(INDIVIDUAL WHO OWNS OR CONTROLS >25% OF THE COMPANIES SHARES, DIRECTLY OR INDIRECTLY)

|  |  |  |  |  |  |  |
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|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |       |
| Tax residence |  | Tax ID.No |  | Ownership % |
| E-mail:       | Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |

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| --- | --- | --- | --- | --- | --- | --- |
|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |       |
| Tax residence |  | Tax ID.No |  | Ownership % |
| E-mail:       | Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |

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|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |       |
| Tax residence |  | Tax ID.No |  | Ownership % |
| E-mail:       | Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |

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|       |  |       |  |       |  |       |
| Name |  | Icelandic ID.-No |  | **Date of birth** |  | Nationality |
|       |  |       |  |       |
| Address |  | Postcode |  | Place |
|       |  |       |  |       |
| Tax residence |  | Tax ID.No |  | Ownership % |
| E-mail:       | Is the person a politically exposed person (PEP): [ ]  Yes [ ]  No |

REQUIRED DOCUMENTS

|  |  |
| --- | --- |
| [ ]  | Certificate from public register, e.g. register of limited companies (not more than three months old) |
| [ ]  | Verified copy of any Power of Attorney |
| [ ]  | Valid personal ID (e.g. passport or driver’s license) for all board members, holders of Power of Attorney and other persons authorized to represent and legally bind the legal entity. If an individual is unable to present the original personal ID in person, an original copy certified by a notary public must be provided |
| [ ]  | Proof of beneficial ownership. Please trace and provide proof of legal owner for each entity. |
| [ ]  | Annual account |

|  |  |
| --- | --- |
| **\*FATCA:** | Taxpayer identification Number (Tin number): In accordance with U.S. tax legislation, Foreign Account Tax Compliance Act (FATCA), please provide TIN number if the customer or its beneficial owner(s) have tax residency or obligations in the United States. |
| **\*CRS:** | Disclosure of information in accordance with an agreement between the OECD-states, Common Reporting Standard (CRS). Please provide tax identification number if the customer or its beneficial owner(s) have tax residency or obligations in the OECD-states. |
| **\*PEP:** | A person who is or has been entrusted with a prominent public function, an immediate family member or known to be a close associate of such a person. |

Arion Bank hf. reserves the right to request additional information or verification, as necessary.