

# Know Your Customer: Company



This form is to be filled up by customer at the commencement of a banking relationship. Applicable for all entity types.

DATE (DD-MM-YYYY)

\* Mandatory Field

## 1. CUSTOMER KEY DETAILS

LEGAL NAME OF CUSTOMER (as registered in the constitutional document)\*

FULL TRADING NAME\*

SAME AS LEGAL NAME

OTHER:

CUSTOMER TYPE\*

<input type="checkbox"/> Domestic company (locally-incorporated in Philippines)	<input type="checkbox"/> Foreign Company registered outside Philippines
<input type="checkbox"/> Branch Office or Representative Office in Philippines	<input type="checkbox"/> Trust Company
<input type="checkbox"/> Partnership	<input type="checkbox"/> Government
<input type="checkbox"/> Other, please specify	

REGISTRATION NUMBER\* (unique identifier) DATE OF REGISTRATION (DD-MM-YYYY)\* COUNTRY OF REGISTRATION\*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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REGISTERING AUTHORITY / REGULATING AUTHORITY\*

TAX IDENTIFICATION NUMBER\*

<input type="text"/>	<input type="text"/>
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LISTED IN A STOCK EXCHANGE?\*

IF YES, NAME OF STOCK EXCHANGE\*

NO

YES:

SHARE CAPITAL ISSUED IN THE FORM OF BEARER SHARES? IF YES, PLEASE PROVIDE DETAILS

NO

YES:

## CONTACT DETAILS\* COUNTRY CODE + AREA CODE + PHONE NUMBER

OFFICE PHONE 1:

EMAIL ADDRESS 1:

OFFICE PHONE 2:

EMAIL ADDRESS 2:

FAX NUMBER:

WEBSITE URL:

PRINCIPAL BUSINESS ADDRESS\* (NOT A P.O. BOX)

REGISTERED OFFICE ADDRESS\* (NOT A P.O. BOX)

BLDG/STREET:

SAME AS PRINCIPAL BUSINESS ADDRESS

BLDG/STREET:

TOWN/CITY:

TOWN/CITY:

PROVINCE/STATE:

PROVINCE/STATE:

ZIP/POSTAL CODE:

ZIP/POSTAL CODE:

COUNTRY:

COUNTRY:

LOCAL AGENT DETAILS (if any)\* (FULL NAME AND ADDRESS)

FULL NAME:

BLDG/STREET:

PROVINCE/STATE:

TOWN/CITY:

ZIP/POSTAL CODE:

COUNTRY:

MAILING INSTRUCTION\* (SELECT ONE ONLY)

PRINCIPAL ADDRESS

REGISTERED ADDRESS

LOCAL AGENT ADDRESS



## 2. INCOME & BANKING DETAILS

NATURE OF BUSINESS / INDUSTRY TYPE\*

a.

b.

INDUSTRY SUB-CATEGORY

a.

b.

SOURCE OF FUNDS

INTERNATIONAL BANKING ACTIVITY? IF YES, PLEASE LIST COUNTRY NAME(S)\*

NO  YES:

REASON FOR SEEKING BANKING SERVICES\* (MANDATORY FOR FOREIGN COMPANIES)

- |                                                  |                                                 |
|--------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Borrowing in-country    | <input type="checkbox"/> Import/Export Trade    |
| <input type="checkbox"/> Humanitarian work       | <input type="checkbox"/> Investing in-country   |
| <input type="checkbox"/> Related to local entity | <input type="checkbox"/> Other, please specify: |

EXPECTED CUSTOMER ACTIVITY\* (SELECT ALL APPLICABLE)

- |                                                    |                                                          |
|----------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Cash deposits             | <input type="checkbox"/> International transfer (in/out) |
| <input type="checkbox"/> Cash withdrawals          | <input type="checkbox"/> Domestic transfer (in/out)      |
| <input type="checkbox"/> Clearing cheques          | <input type="checkbox"/> Cheque credits / debits         |
| <input type="checkbox"/> Foreign currency exchange | <input type="checkbox"/> Other, please specify:          |

LIST OF BANKS\*(LIST ALL BANKS WITH WHOM YOU HAVE EXISTING BANKING RELATIONSHIPS)

BANK NAME	BANK ADDRESS	ACCOUNT TYPE

## 3. DESIGNATED CONTACT PERSONS\*

FULL NAME AND CONTACT INFORMATION

NAME	FAX NO.
TELEPHONE NO.	EMAIL ADDRESS
NAME	FAX NO.
TELEPHONE NO.	EMAIL ADDRESS
NAME	FAX NO.
TELEPHONE NO.	EMAIL ADDRESS

## 4. CUSTOMER RECORDS\* Please refer to KYC Checklist

## 5. CUSTOMER'S ACKNOWLEDGMENT\*

I/WE HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE.

FULL NAME AND SIGNATURE OF AUTHORIZED SIGNATORY/IES

SIGNATURE VERIFIED DATE (DD-MM-YYYY)	SIGNATURE VERIFIED DATE (DD-MM-YYYY)
SIGNATURE VERIFIED DATE (DD-MM-YYYY)	SIGNATURE VERIFIED DATE (DD-MM-YYYY)

## FOR BANK USE ONLY

SUBMITTED BY: RM / Client Services (Print Name and Signature)	DATE	CIF ID
SIEBEL/IKNOW: INPUTTED BY / VERIFIED BY	FINACLE 10: INPUTTED BY / VERIFIED BY	
DATE	DATE	DATE

## 5. KYC CHECKLIST

Please provide the following documents as part of the KYC for Company. This applies to the following types of entities: Private Companies (including ITF/TITF accounts), Public Companies including subsidiaries, Financial Institutions, Trusts/Foundation, Partnerships, Government bodies including government-owned-and-controlled corporations (GOCCs), Associations and Cooperatives including Charities, Regulated Fund Managers, and Banks.

KYC REQUIREMENTS	
1. KYC Form: Company	-Original and duly signed by the company's authorized signatories
2. Certificate of Incorporation or equivalent document	-Certified true copy or consularized
3. Articles of Incorporation & By-Laws / Memorandum of Association / Constitution / Partnership Agreement (in case of partnerships) or equivalent document / Proposed Articles of Incorporation and By-Laws (for TITF) or Articles of Incorporation and By-Laws of the Parent Company (for ITF) In case of government entity, name and copy of the relevant legislation establishing the government entity.	-Certified true copy or consularized -Copy of the relevant legislation (for government entity)
4. Original Board Resolution / Secretary's Certificate / Power of Attorney / Special Power of Attorney / or equivalent document as Authority to Act document	-Original and consularized if executed abroad
5. Latest General Information Sheet filed with the Securities and Exchange Commission (SEC)	-Photocopy of latest filing with the SEC
6. Names of all Directors / Persons with Executive Authority such as Chairman, CEO, President or names of all Senior Management in case of a branch/representative office / Names of all Partners in case of partnership / Names of all Trustees in case of Trusts	-To be verified against the latest GIS or other reliable documentation/electronic data.
7. For each company Signatory/Authorized Representatives: a. KYC Form for Associated Parties b. One Primary ID each or Two Secondary IDs – with full name, date of birth and residential address c. Specimen Signatures (ANZ Specimen signature card)  All signatories/authorized representatives in the Board Resolution or Secretary's Certificate must submit (a) to (c) above, or if not, the Company Secretary shall submit a Letter Notice to ANZ of the names of signatories who will not sign or transact on behalf of the Company.	-KYC Form – Original -Primary ID – Original sighted or certified true copy -Specimen signatures – Set of 3 signatures to be simultaneously signed  -Letter notice by Company Secretary – Original
8. For Listed Public Companies on an ANZ-approved stock exchange: Proof of company listing on the stock exchange; or  In case of a Subsidiary (at least 50% owned) of a Publicly listed Company on an ANZ-approved stock exchange: Proof of parent company listing on the stock exchange  <i>Note: Refer to your RM for the list of ANZ-approved exchanges</i>	-Search from relevant company registry or regulator or other reliable independent documentation / electronic data
9. For Unlisted Private Companies / Listed Companies but not on an ANZ-approved stock exchange / Partnerships / Trusts: verification of at least one Director/Partner/Trustee is required ▪ KYC Form for Associated Parties for at least one Director ▪ One Primary ID or Two Secondary IDs of at least one Director – with full name, date of birth and residential address  For each Beneficial Owner and Controller (individuals exercising ownership >=25% shareholding) and those who exercise control over the company even if effective ownership is less than 25%: ▪ KYC Form for Associated Parties for each beneficial owner ▪ One Primary ID each or Two Secondary IDs of each beneficial – with full name, date of birth and residential address  <i>Note: Refer to your RM for the list of ANZ-approved exchanges</i>	-KYC Form – original -Primary ID – original sighted or certified true copy
10. For Financial Institutions regulated by an ANZ-approved Regulator: Name of Regulator and proof of regulated status <i>Note: Refer to your RM for the list of ANZ-approved regulators</i>	-Search from relevant company registry or regulator or other reliable independent documentation / electronic data
11. Certificate of Registration with BSP, AMLC or other regulatory agency as MSB (applicable if customer is engaged in Money Service Business, i.e. remittance agent, money changer, foreign exchange dealer, or similar business)	-Photocopy
12. Treasurer's Affidavit (for TITF)	-Original or certified true copy

## ACCEPTABLE PRIMARY AND SECONDARY IDENTIFICATION DOCUMENTS FOR ANZ

### \*\*PRIMARY GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION

Document Type	Primary IDs acceptable for Philippines
1) Passport	-Domestic Passport -Foreign Passport (only of countries that are of acceptable risk)
2) Driver's License	-Domestic Driver's License -Foreign Driver's License (acceptable as primary ID only for Low or Medium Risk countries as per the Jurisdictional Risk Checker)
3) Government issued ID	-Alien Certificate of Registration (ACR) / Immigrant Certificate of Registration -Bureau of Internal Revenue (BIR) Tax Identification Number -National Bureau of Investigation (NBI) clearance -Professional Regulation Commission (PRC) ID -Police clearance -Seaman's Book -Senior Citizen Card -Social Security System (SSS) Card or Unified Multi-Purpose ID -Voter's ID -National Identity Cards (acceptable only for Low or Medium Risk countries per the JRC <b>and</b> where such National Identity card is acceptable in other ANZ locations)

### \*\*GOVERNMENT ISSUED PHOTOGRAPHIC/NON-PHOTOGRAPHIC SECONDARY IDENTIFICATION

Document Type	Secondary IDs acceptable for Philippines
1) Birth Certificate	-Birth Certificate (issued by the National Statistics Office (NSO)) -Foreign Birth Certificate / Card / Extract
2) Government issued ID	-Barangay Certification -Certification from the National Council for the Welfare of Disabled Persons (NCWDP) -Department of Social Welfare and Development (DSWD) Certification -Government Office ID or GOCC ID (BIR, Philhealth, AFP, and other govt-issued IDs) -Government Service Insurance System (GSIS) e-Card (with photo) -Health or Pensioner Card -Philhealth Insurance Card ng Bayan -OWWA/OFW ID -Postal ID -Foreign Driver's License -ID issued by the National Council on Disability Affairs (NCDA) -National Identity cards of other jurisdictions
3) Tax assessment notice (latest issued)	-Tax assessment notice
4) Travel document (for Recent Arrivals)	-Official Travel Document -Temporary Travel Document -Travel Certificate
5) Documents to be used for address verification (issued within the last 3 months)	-Government benefits notice -Evidence of correspondence from a government agency such as the BIR, SEC, DTI, Insurance Commission
6) Other acceptable IDs allowed under local regulations	-Company IDs issued by private entities or institutions registered with or supervised or regulated either by the BSP, SEC or Insurance Commission

### \*\*NON-GOVERNMENT ISSUED SECONDARY IDENTIFICATION

Document Type	Secondary IDs acceptable for Philippines
1) Citizenship Certificate	Citizenship Certificate issued by a government or the United Nations or an agency of the United Nations
2) Student IDs (for students or Minors)	-Photo-Bearing school ID signed by Principal or head of school -Student Permit (in lieu of Domestic Driver's License)
3) Documents to be used for address verification (issued within the last 3 months)	-Bank Passbook / Statement -Domestic Credit Card Statement -ANZ Credit Card Statement or other Foreign Credit Card Statement (issued by reputable foreign institutions from low/medium risk jurisdictions) -Utility bill (e.g. water, electricity, telephone/mobile, cable, internet) -Billing Statement from property developers in Philippines -General Information Sheet submitted to the Securities and Exchange Commission
8) Other acceptable IDs allowed under local regulations	-Integrated Bar of the Philippines (IBP) ID

Note: The use of other forms of primary or secondary identification may be used only upon the endorsement of the Country MLRO.