

KNOW YOUR CLIENT (KYC)/CUSTOMER DUE DILIGENCE (CDD)
ENHANCE DUE DILIGENCE(EDD) FORM



This form is meant and adopted to obtain information/set of documents to establish the identity of the client, as required by applicable laws.

Member information

Name (Mr. / Mrs. / Ms.): _____ Date: ___ / ___ / ___
Account #: _____ Gender: _____
Father/Husband's Name _____
Mother/Wife: _____
Contact Details:
Cell No: _____ Home No: _____
E-mail: _____
Permanent Address: _____
Occupation: _____ Source of Income: _____
Range of Income (e.g. TTD \$1000-\$5000 etc.): _____

Declaration

- a) Has any Financial Institution ever refused to open your account? Yes No
- b) Do you or any of your immediate family hold/ held a position in any Political Party, Judiciary or Senior Military? Yes No
- c) If yes to (b) above please state: _____
- d) Do you agree to submit source of wealth where required? Yes No
- e) Do you deal in high value items i.e. Gold, Silver, Diamonds etc.? Yes No
- g) Do you belong to countries where Anti Money Laundering regulations are ignored? Yes No
- h) Are you a citizen or hold permanent resident in any other country: Yes No
- i) If yes to (h) above state: _____

I hereby declare that the above information is true and correct to the best of my our knowledge and I shall immediately update CECU if there is any change in such information. I authorize that CECU may verify any or all information provided in with this KYC form.

Signature of Member

FOR OFFICIAL USE ONLY

Member Risk Profile High Medium Low

Information Verified by:

Print Name: _____ Signature: _____
Department: _____
Comments: _____

Reviewed by Compliance Officer:

UN Security Council Listing
FATF Listing
CFATF Listing
TTCLCO

Name: _____ Signature: _____
Date: _____
Comments: _____