

Information Form

A. BUSINESS ENTITY INFORMATION

NAME OF THE COMPANY			
TYPE OF COMPANY	<input checked="" type="checkbox"/> Private Company Limited by Shares <input type="checkbox"/> Limited by Guarantee <input type="checkbox"/> Public Company		
REGISTERED OFFICE ADDRESS	ROOM 8, S-V, 6/F, VALIANT INDUSTRIAL CENTRE, 2-12 AU PUI WAN STREET, FOTAN, NT, HONG KONG		
DATE OF INCORPORATION		BR NUMBER	
SHARE CAPITAL	CURRENCY	NUMBER OF SHARES	PRICE PER SHARE
BUSINESS ACTIVITIES OF THE COMPANY	1. 2.		
COUNTRIES OF OPERATION OR TARGETED MARKET			
LIST OF COUNTRIES WHERE MAJORITY OF YOUR CLIENTS LOCATED AND WHERE WILL YOUR PAYMENTS COME FROM			
LIST OF COUNTRIES WHERE MAJORITY OF YOUR SUPPLIERS LOCATED AND WHERE THE FUNDS WILL BE PAID TO			
SOURCES OF FUNDS OF THE BENEFICIAL OWNER(S) IF IT'S DEVIDENDS FROM ANOTHER COMPANY, PLEASE NAME THE COMPANY; IF IT'S SALARY FROM ANOTHER COMPANY, PLEASE WRITE YOUR POSITION AND COMPANY NAME; ETC.			
ESTIMATED ANNUAL TURNOVER (FOR THE FIRST 3 YEARS)	1. USD 2. USD 3. USD		

DETAILS OF DIRECTORS OF THE COMPANY

NAME (IN ENGLISH)	PASSPORT NO.	NATIONALITY	TELEPHONE NUMBER	EMAIL ADDRESS	RESIDENTIAL ADDRESS

DETAILS OF SHAREHOLDERS OF THE COMPANY

NAME (IN ENGLISH)	PASSPORT NO.	NATIONALITY	NUMBER OF SHARES HELD	TELEPHONE NUMBER	EMAIL ADDRESS	RESIDENTIAL ADDRESS

DETAILS OF BENEFICIAL OWNER(S) OF THE COMPANY (IF DIFFERENT FROM SHAREHOLDERS)

NAME (IN ENGLISH)	PASSPORT NO.	NATIONALITY	TELEPHONE NUMBER	EMAIL ADDRESS	RESIDENTIAL ADDRESS

ADDITIONAL CONTACT DETAILS (required)

Please provide us two more contact telephone numbers and email addresses. We will use this information in the event we cannot contact you using the above contact details.

NAME (IN ENGLISH)	TELEPHONE NUMBER 1	TELEPHONE NUMBER 2	EMAIL ADDRESS

CORPORATE SHAREHOLDER (Please provide a copy of the Organization chart in case of multiple layers of BO's)	
NAME OF THE COMPANY	
REGISTRATION NUMBER	COUNTRY OF INCORPORATION:
DATE OF INCORPORATION	REGISTERED OFFICE ADDRESS:
MAIN BUSINESS ACTIVITY OF THE COMPANY	
NAMES OF DIRECTORS OF THE COMPANY	
NAMES OF SHAREHOLDERS OF THE COMPANY (Please provide the shareholding structure)	
NAMES OF THE BENEFICIAL OWNERS (BO) HOLDING MORE THAN 25% IN THE COMPANY (Please provide a copy of the Passport of such BO')	

DECLARATION

I / WE HEREBY CONFIRM THAT THE INFORMATION PROVIDED IN THIS FORM ARE TRUE AND CORRECT.

I AM / WE ARE AWARE THAT I / WE MAY BE SUBJECT TO PROSECUTION AND CRIMINAL SANCTIONS IF I AM / WE ARE FOUND TO HAVE MADE ANY FALSE STATEMENT WHICH I / WE KNOW TO BE FALSE OR WHICH I / WE DO NOT BELIEVE TO BE TRUE, OR IF I / WE HAVE INTENTIONALLY SUPPRESSED ANY MATERIAL FACT.

I / WE UNDERTAKE TO NOTIFY [SINO SERVICE](#) IN WRITING SHOULD THERE BE ANY CHANGES THEREIN.

NAME & SIGNATURE OF THE CLIENT

DATE

CHECKLIST FOR KYC & CDD

INDIVIDUAL DIRECTORS / SHAREHOLDERS	
DOCUMENTS REQUIRED	CHECK
Copy of Passport	<input type="checkbox"/>
Copy of Utility Bill (not older than 3 months) or driving license or Bank statement (for residential proof of address)	<input type="checkbox"/>
Copy of CV for each Director / Shareholder	<input type="checkbox"/>
CORPORATE SHAREHOLDERS	
DOCUMENTS REQUIRED	CHECK
Business Registration Certificate / Certificate of Incorporation	<input type="checkbox"/>
Memorandum and Articles of Association / Constitution	<input type="checkbox"/>
Copy of latest audited / unaudited financial statements (if available)	<input type="checkbox"/>
Copy of Passport and proof of address documents (as mentioned above) for all the Directors of the parent Company	<input type="checkbox"/>
Copy of Passport and proof of address documents (as mentioned above) for all the Beneficial owners of the parent Company	<input type="checkbox"/>
Latest Business Profile from relevant authorities (if available)	<input type="checkbox"/>
Organization Chart to explain the shareholding structure of the Company	<input type="checkbox"/>