## KNOW YOUR CUSTOMER (KYC) PROFILE FORM FOR BUSINESSES/ORGANISATIONS CHARITIES/NGO'S ETC.

		-	DATE A/C No. CURRENCY	
		F	OFFICER'S	
		Ė	MANAGER'	
<b>Type of Business Account</b>			Currency of	Account
<ul> <li>□ Limited Liability Company</li> <li>□ Sole Proprietorship</li> <li>□ Partnership</li> <li>□ Non-governmental Organization/Charity</li> <li>□ BOI Approved Limited Liability Company</li> <li>□ Others</li> </ul>			□ LKR □ USD □ Others	
Type of Account Required				
□ Savings A/c □ Current A/c □ Fixed/Call Deposit A/c □ Money Market A/c □ Treasury Bill/Bonds □ NRRA □ SIERA		00000	Resident Fore Resident Non Resident Gue Resident Gue Exporters For	Foreign Currency A/c sign Currency A/c National Foreign Currency A/c st Foreign Currency A/c st Rupee A/c eign Currency A/c fy)
PART A – Customer Information				
Customer's Full Name :		Regist	ered Address	
Registration Number Na	ature of Business/Inc	dustry		Country of Incorporation
Date of Incorporation		Date of	of Commencen	nent of Business
Nature and Purpose of Business	]	Please	Specify "Natu	re and Purpose of Business" in detail
□ Manufacturing     □ Whole Sale Trading     □ Import/Export     □ Retailing     □ Professionals     □ Personal Services     □ Catering/Restaurant     □ Service Industry(Please specify)     □ Others (Please Specify)				
(Clubs/Societies/Charities/Associations and No areas of activity )	on Governmental Or	rganiza	ntions should p	provide details of the objectives, scope and
Factory Address (If applicable):				
Number of Employees:				

**Tax Declaration**The following is a mandatory declaration which is required to be completed by all under the Inland Revenue Act No.28 of 1979

Inc	ome Tax file No.					
Cor	rrespondence Name & Address					
Col	rrespondence Name & Address					
Per	rson to Contact					
Tel	Telephone Number Facsimile Number E-mail					
	Unless specified otherwise correspondence will be sent to you by mail					
Reg	gistered Office/Factory/Principal Office Address	Detail of Introducer				
(Ca	omplete only if different from correspondence Address)	Name				
		Account Number				
		Address				
		Telephone Number				
Diag		1				
Piea	se complete as appropriate					
1. D	o you maintain any other account(s) with the People's Bank in	the above name? Yes/No				
If	yes, please complete					
	Bank/Branch Account Number					
	Bank/Branch	Account Number				
2.	Details of present Bankers					
	Bank/Branch	Account Number				
3.	Do you use a company or Corporate Credit Card issued by th	e People's Bank Yes/No				
<ul> <li>4. Existing facilities (with other financial institutions/bankers)</li> <li>□ Over Draft</li> <li>□ Loan</li> <li>□ Import/Export</li> <li>□ Others</li> </ul>						
5.	Are you a Subsidiary/Associate of another organization? Yes	s/No				
	sidiary of  Owned more than 50%	Customer No:				
Associate of						
	Associate of (i.e. Owned 20 – 50%) Customer No.					
6. Is	the principal/subsidiary listed in the local/foreign stock exchai	nge? Yes/No (If yes please give details)				
	- -					

PART B Financial Information							ł	
Note: If a new company pleas  Are the audited financial sta						No		l
Description (LKR'000)		Current Year				Previous Year		
Annual sales turnover:								
Net Profit/Loss								
Paid-up capital + accumulate	ed Profits							
PART C Director/Share	holder infor	nation						]
TAKE Director/share	notaer injorr	nanon						
Directors and Major Share Holders (More than 10% Voting Shares) *	National Ide Card Number		% of Shares	Held	Contact	No.	Address	
operations of the entity. In the case of Trust, nomined All Directors and Major Sl	e and fiduciary	governi account should o	ing body or comming body or comming setting the details of all trust complete KYC Inc.	ttee or any tees, settle dividual P	y other peers/granto Profile Fo	rson who has rs and benefi rm (Form N	s control or influence over the ciaries should be provided to. PF 0300A) in addition to	
	ase of Clubs/s	ocieties/	Charities/Associat				nancial Transactions Reporting ganisations two Officers should	
PART D Business Infor	mation							
1. Anticipated Volumes : Expected/Usual average	volumes of de	posits i	nto the account in	Rupees p	er month	Į.		
□ Less than 100,000 (App. US\$ 1,000) □ 3,000,000 to 5,000,000 (app US\$ 30,000 to 50,000) □ 500,000 to 500,000 (app. US\$ 1,000 to 5,000) □ 5,000,000 to 1,000,000 (app. US\$ 5,000 to 10,000) □ 7,000,000 to 1,000,000 (app. US\$ 5,000 to 10,000) □ 7,000,000 to 1,000,000 (app. US\$ 70,000 to 100,000) □ 0 2,000,000 to 3,000,000 (app. US\$ 20,000 to 30,000) □ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						)		
2. Assets owned by the Bus								
<ul><li>□ Property/Premise</li><li>□ Motor Vehicle</li><li>□ Financial Assets</li></ul>	☐ Motor Vehicle ☐ Others (Specify)							

3. Source of Assets – Assets Acquired from  Business income Investments Bank Facilities	□ Donations (Local/Foreign) □ Others (Specify)
PART E – Verification	
We confirm that the above details are correct	
Signature and Rubber stamp (A)	Signature and Rubber Stamp (B)
For Bank Use Only Documents Submitted	Remarks
Mandate   Board Resolution/   Business Registration and Certificate (Form 2A, 2B, 2C, 2D or 2E as appn new Companies Act and Form 41 incorporated under the Old Act)   Articles of Association   Form 20   BOI Agreement (If BOI approved by t   Certificate to Commence Business business)   Latest Audited Accounts (If available   Constitution/Charters etc (If Club, Association or NGO)   Individual Customer information fo all Directors/Major Share Holder signatories, administrators, members body or committee/Trustees, Settle beneficiaries   Trust Deed (if Trust)	Incorporation riate under the for Companies  ny)  EDB) public quoted  ciety, Charity,  completed by ffice bearers, the governing
Name of Bank Officer	Signature of Bank Officer Date