

CLIENT INFORMATION FORM BUSINESS

BCIF-122019

To become a client of the JMMB Group the following information is required from Directors and Authorized Signers: 1. One (1) valid identification (Driver's License or Passport or National ID/Resident/Citizenship Card + Birth/Adoption Certificate); 2. Tax Registration Number (Jamaica & Dominica Republic only) or Foreign Equivalent, 3. Proof of Residential Address (Must have the Director or Authorized signer's name and residential address on it and must not be older than 3 months)							
Kindly select territory where application is being completed							
☐ Jamaica (JA) ☐ Trinidad & Tobago (TT) ☐ Dominican Republic (DR)							
	BUSINESS INF (Complete wher						
(Complete where applicable) Registered Name:							
Description of Business:							
Date of Incorporation (dd/mm/yyyy):		Country of Incorporation:					
Industry/Sector:	Industry/Sector:			ion No.:			
Primary Trade Area(s): ☐ Jamaica (JA) ☐ Tr	inidad & Tobago (TT) 🔻 🗆 D	ominican Republic (DR)	☐ Other (s	specify):			
Primary Source of Funding (How did you get this money?)							
Address of Registered Office:							
Parish/City:	State:	Zip Code/Sector:		Country:			
Tel. No. 1:	Tel. No. 1: Tel. No. 2:						
Website: Email:							
Mailing Address (if different from Registered O	ffice):						
Parish/City:	State:	Zip Code/Sector:		Country:			
Primary Contact Person:	Position:		Tel. No.				
Secondary Contact Person:	Position:	Tel. No.					
INCOME DETAILS & PROJECTED LEVEL OF ACTIVITY							
What is the maximum projected level of activity within a year? (e.g. between \$100,000 - \$200,000)							
Expected transaction amounts and frequency (e.g. \$10,000 per month)							
Overall Income:	Source of Wealth: (How did you get this money/ wealth?)						
Major Suppliers (where applicable):							
Purpose of the Accounts:							
BANKERS							
Name of Principal Banker: Name of Secondary Banker:							
Address:		Address:					
Tel. No.:	: 	Tel. No.:		Tel. No.:			
	LEVEL OF AUTHORITY TO	MANAGE PORTFOLI	0				

☐ Full Discretion - Client grants full authority v	without consultation	Partial Discretion - Clients must	be contacted before execution of any				
trade or transaction Custody - No discretion to trade. Assets are for safekeeping and reporting only							
RISK APPETITE							
☐ Conservative (Low Risk) ☐ Med	ium (Medium Risk)	Aggressive (High Risk)					
CORPORATE RELATIONSHIP INFORMATION							
Politically Exposed Persons (PEP): Are any of & adopted child, parents, siblings, child's spour member of any House of Parliament, Minister of above the rank of Assistant Commissioner, Permagency/ statutory body, official of any political par Please provide specific details in the respective	se*) or their close busine f Government, member of lanent Secretary or Chief Trty &/or director or CEO of a section below.	ss associates, a current or forme the judiciary, military official abov echnical Director in charge of a Go any company owned by your count	er Head of State, Head of Government re the rank of Captain, member of police overnment department/ministry/executive try of residence or a foreign government				
Principal Shareholders - (This refers to the principal government issued identification, TRN (if applicable) & proof	f of address. For additional share	cholders please provide information on a se					
Principal Shareholder 1	Pr	incipal Shareholder 2					
Full Name:	Fu	ıll Name:					
Residential Address:	Re	esidential Address:					
Tel. No.:	Те	el. No.:					
Title/Position:	Title/Position: Title/Position:						
Email Address:	Email Address: Email Address:						
Is a US Person? ☐ Yes ☐ No If Yes state US affiliation PEP? ☐ Yes ☐ No If yes capacity: Is a US Person? ☐ Yes ☐ No If Yes state US affiliation PEP? ☐ Yes ☐ No If yes capacity:							
<u>Directors</u>							
Full Name Residential Address (Title, First, Middle, Last Name) (Proof of Address must be submitted)		Telephone Number	PEP? (If yes, state capacity)				
Authorised Signers							
Full Name (Title, First, Middle, Last Name)		Signature PEP? (If yes, state capacity)					
Is the company:	1						
a. Acting as a trustee for another in relation tob. One with nominee shareholders, or shares		or one-off transaction concerned?	? □ Yes □ No □ Yes □ No				

rd about us v	io. 「	Branch Effort	□Campaign	□Client	DN □Client Car	o Contro	□ Eino	ncial Advisor
ra about us v		JERIAN ENOR JERIEND JEST MEMBER JOther (Please spec	□Internet □Television	□Newspaper	□Radio			on Workshop
			DECLAR	ATION & CONSE	NT			
uests from regue confirm that be d upon by the	lators and other by signing this fo JMMB Group; a	organizations or in rm, I/we declare and Iso that I/we are an	operations, risk and to ndividuals who are legand acknowledge that the othorizing the JMMB G signing and are aware	ally entitled to such in the information given to the roup to take such ste	formation. by me/us is, to the ps as it may deer	e best of my/our	r knowledge	, correct and wil
ame	. I/ VVC Have reac	Position	Signing and are aware	Signature	italiied fiereiii.			
								Company Stamp/Seal
ate (dd/mm/yyy	y):							
			FATC	A INFORMATION				
you a disre	garded entity*	for US Federal h one (1) owner wi	GIIN) (financial institution Tax purposes? Tak purposes and the properties of the	□ Yes	□ No			
e you a disre sregarded Entit eparate from its you maintai	garded entity* y is an entity with s owner for liabili n financial acc	for US Federal h one (1) owner whity purposes. counts for non-	Tax purposes?	☐ Yes s a corporation. The o	□ No entity elects not to	o be separate fi □ Yes	rom its owne	er for tax purpos
e you a disre sregarded Entit eparate from its you maintail TCA Code:	garded entity* y is an entity with s owner for liabili n financial acc	for US Federal h one (1) owner whity purposes. counts for non-	Tax purposes? hich is not registered a	☐ Yes s a corporation. The control of the control	□ No entity elects not to utions (FFI's)? tion from FATC.	o be separate fi ☐ Yes A reporting co	rom its owne	er for tax purpos
e you a disre gregarded Entit eparate from its you maintail	garded entity* y is an entity with sowner for liabile n financial acc Exemp Definition An organizat	for US Federal h one (1) owner whity purposes. counts for non- pt payee code (if	Tax purposes? hich is not registered a	☐ Yes s a corporation. The in Financial Institu Exemp FATCA Co	□ No entity elects not to utions (FFI's)? tion from FATC. de Definitio A regulat section 8 the tax ye	o be separate fi ☐ Yes A reporting co n ed investmen 51 or an entity	rom its owner S No ode (if any) t company y registeree	er for tax purpos
e you a disregarded Entit eparate from its you maintain TCA Code:	garded entity* y is an entity with sowner for liability in financial accompany Exempt Definition An organizate 501(a) or any section 7701 The United S	for US Federal h one (1) owner whity purposes. counts for non-pot payee code (if tion exempt from y individual retire (a)(37) States or any of it	Tax purposes? hich is not registered as participating Foreig any)	☐ Yes s a corporation. The in Financial Institu Exemp FATCA Co	□ No entity elects not to utions (FFI's)? tion from FATC. de Definitio A regulat section 8 the tax yo 1940	o be separate for Yes A reporting coon need investmen 51 or an entity ear under the	rom its owner No ode (if any) t company y registered Investmen	er for tax purpos as defined in d at all times d
e you a disre gregarded Entit eparate from its you maintain TCA Code: ATCA Code	garded entity* y is an entity with sowner for liabile financial acc Exemp Definition An organizat 501(a) or an section 7701 The United S instrumental A state, the I commonwea subdivisions	for US Federal h one (1) owner whity purposes. counts for non- ot payee code (if ion exempt from y individual retire (a)(37) States or any of in ities District of Colum of the possession or instrumentality	Tax purposes? hich is not registered as participating Foreig any)	□ Yes s a corporation. The design Financial Institute Exemp FATCA Co H d in I J tical	□ No entity elects not to utions (FFI's)? tion from FATC. de Definitio A regulat section 8 the tax yo 1940 A commo	o be separate for Yes A reporting coon need investmen 51 or an entity ear under the	rom its owner S	as defined in d at all times d
e you a disressegarded Entite eparate from its you maintain TCA Code: ATCA Code A B C	parded entity* y is an entity with a owner for liability of financial accurate particular financial financial financial accurate particular financial financ	for US Federal h one (1) owner whity purposes. counts for non- port payee code (if cion exempt from y individual retire (a)(37) States or any of in ities District of Colum lith or possession or instrumentalit n the stock of whore established is Regulations sec	Tax purposes? hich is not registered as participating Foreig any) tax under section ement plan as defined to a U.S. n, or any of their polities which is regularly tradesecurities markets, as tion 1.1472-1(c)(1)(i)	□ Yes s a corporation. The design Financial Institute Exemp FATCA Co	□ No entity elects not to utions (FFI's)? tion from FATC. de Definitio A regulat section 8 the tax you 1940 A common	A reporting content in the content i	rom its owner S No ode (if any) t company y registered Investmen as defined i	as defined in d at all times d t Company Ac
e you a disregregarded Entiteparate from its you maintain TCA Code: ATCA Code A B C D	garded entity* y is an entity with sowner for liabile financial acc Exemp Definition An organizat 501(a) or an section 7701 The United S instrumental A state, the I commonwea subdivisions A corporation on one or modescribed in A corporation expanded af in Regulation	for US Federal h one (1) owner white purposes. counts for non- ot payee code (if ion exempt from y individual retire (a)(37) States or any of in ities District of Column or instrumentalit in the stock of whome established is Regulations secund that is a memb filliated group as ins section 1.1472	Tax purposes? hich is not registered as participating Foreig any)	□ Yes s a corporation. The state of the sta	□ No entity elects not to utions (FFI's)? tion from FATC. de Definitio A regulat section 8 the tax ye 1940 A commo A bank a A broker A trust ex described	A reporting connection and the section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity early	rom its owner S No ode (if any) It company y registered Investmen as defined i ection 581 x under see 947(a)(1)	as defined in d at all times d t Company Ac
e you a disregarded Entiteparate from its you maintain TCA Code: ATCA Code A B C	garded entity* y is an entity with sowner for liability in financial accompany Definition An organizaty 501(a) or any section 7701 The United Sinstrumental A state, the I commonweal subdivisions A corporation on one or modescribed in A corporation expanded affin Regulation A dealer in sinancial instructs, further subdivisions and corporation expanded affin Regulation A dealer in sinancial instructs, further subdivisions and corporation expanded affin Regulation and contracts, further subdivisions and contracts, further subdivisions and contracts are subdivisions are subdivisions are subdivisions and contracts are subdivisions are subdivisions are subdivisions are subdivisions and contracts are subdivisions are subdivision	for US Federal h one (1) owner whity purposes. counts for non-pot payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is is in exempt from a payee code (if it is in exempt from a payee code (it is it	Tax purposes? thich is not registered as participating Foreign any)	□ Yes s a corporation. The state of the sta	□ No entity elects not to utions (FFI's)? tion from FATC. de Definitio A regulat section 8 the tax ye 1940 A commo A bank a A broker A trust ex described	A reporting connection and the section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity ear under the contrast fund a section 45 or an entity early	rom its owner S No ode (if any) It company y registered Investmen as defined i ection 581 x under see 947(a)(1)	as defined in d at all times d t Company Ac

Kind	ly indicate your Chapter 4 Status (FATCA status)						
	Nonparticipating Foreign Financial Institution (including a limited Foreign Financial Institution or limited branch)		International organization				
	Participating Foreign Financial Institution		Exempt Retirement funds				
	Reporting Model 1 Foreign Financial Institution		Entity wholly owned by exempt beneficial owners				
	Participating Foreign Financial Institution in a Model 2 Inter Governmental Agreement jurisdiction		Territory financial institution				
	Registered deemed-compliant Foreign Financial Institution (other)		Excepted nonfinancial group entity				
	Sponsored Foreign Financial Institution that has not obtained a Global Intermediary Identification Number (only for payments made prior to January 1, 2016)		Excepted nonfinancial start-up company				
	Certified deemed-compliant non-registering local bank		Excepted nonfinancial entity in liquidation or bankruptcy				
П	Cortified deemed compliant energy alocaly hold investment		501(c) organization				
	Certified deemed-compliant sponsored, closely held investment vehicle		Non-profit organization Non-Financial Foreign Entity that is publicly traded or				
	Certified deemed-compliant limited life debt investment company (only for payments made prior to January 1, 2017)		affiliated of a publicly traded Non-Financial Foreign Entity				
	Owner-documented Foreign Financial Institution		Excepted territory Non-Financial Foreign Entity				
	Restricted distributor		Active Non-Financial Foreign Entity				
	Non-reporting Inter Governmental Agreement Foreign Financial Institution		Passive Non-Financial Foreign Entity				
Pleas	se indicate your US Status by signing at A or B below:						
Unde	 FATCA Certification for Non-US Entities r penalties of perjury, I/We declare that I have examined the information of and complete. I/We further certify under penalties of perjury that: 1. The person(s) identified on the line entitled Registered Name on this relates or is using this form to certify its status as an owner of a forei purposes of section 6050W. 2. The person identified on the line entitled Registered Name is not a U. 3. The income to which this form relates is: (a) not effectively connecte effectively connected but is not subject to tax under an income tax to connected income, and 4. For broker transactions or barter exchanges, the beneficial owner is ermore. I/We authorize this form to be provided to any withholding agent. 	form gn fin S per d with eaty, an ex	ris the beneficial owner of all the income to which this form nancial institution or as a merchant submitting this form for the rson. In the conduct of at trade or business in the United States, (b) or (c) the partner's share of a partnership's effectively empt foreign person as defined in the instructions.				
Furthermore, I/We authorize this form to be provided to any withholding agent that has control, receipt or custody of the income of which the entity named on the line entitled Registered Company Name is the beneficial owner or any withholding agent that can disburse or make payments of the income of which the named entity on the line entitled Registered Name is the beneficial owner.							
I/We	agree that I will advise JMMB Group immediately if any certification on th	is for	m is no longer valid.				
 Signa	ture of individual authorized to sign for beneficial owner Name		Date (DD/MM/YYYY)				
 Signa	ture of individual authorized to sign for beneficial owner Name		Date (DD/MM/YYYY)				
	certify that I have the capacity to sign for the entity identified on the line	entitle	ed Registered Company Name of this form.				

B. FATCA Certification for US Entities

Under penalties of perjury, I/We certify that:

- 1. The Taxpayer Identification Number (TIN) provided is correct (or we are waiting for a number to be issued to us), and
- 2. The entity is not subject to backup withholding because: (a) The entity is exempt from backup withholding, or (b) The entity has not been notified by the Internal Revenue Service (IRS) that they are subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the entity that they are no longer subject to backup withholding, and

	tity is U.S. entity , and .TCA code(s) entered on this forn	n (if any) indi	cating that the entity is ex	empt from F	ATCA reporting	is correct.
because you have interest paid, acq	tructions - You must cross out ite ve failed to report all interest and juisition or abandonment of secu- ents other than interest and divide	I dividends or ed property,	on your tax return. For reaction cancellation of debt, cont	al estate tran ributions to	nsactions, item i an individual ret	2 does not apply. For mortgage tirement arrangement (IRA), and
Signature of US I	Person	 So	cial Security Number (SSI	N)	Date (I	DD/MM/YYYY)
Signature of indiv	idual authorized to sign for US P	 erson Na	me		Date (E	DD/MM/YYYY)
outside a JMMB I hereby certify t identification(s). Name Address Line 1:	hat the signature(s) appearing of		was/were affixed in my p	_	-	_
Address Line 2:			Country:			
		FO	R INTERNAL USE ONLY	'		
Subsidiary/Bran Documents Rec	nch/Departmenteived from Client					
☐ Certificate of F☐ Company TRN☐ Financial State☐ Form W-8BEN☐ ID, TRN & Pro	ements	ofit Örg. issu □lt ırns □	ed by Department of Coo Board Resolution Indemnity Form W-8EXP	perative & F □ Letter fr □ Partner □ Form W	riendly Societies om Ministry Of ship Agreement	s) Finance
	Receiving Agent:		Signature:			Date (dd/mm/yy):
FOR BRANCH USE ONLY	Input Agent:		Signature:			Date (dd/mm/yy):
Risk Status: Low Medium High			Connected Party: Relationship Office ☐ Yes ☐ No			ficer:
	If High Risk Approved by:					
FOR CENTRALISE	Inputting Officer:		Signature:			Date (dd/mm/yy)
BUSINESS SUPPORT	Approving Officer:		Signature:			Date (dd/mm/yy):
SERVICES	Scanning Officer:		Signature:			Date (dd/mm/yy):