

Customer Due Diligence (CDD) Data Collection Form

PEOPLE'S LEASING & FINANCE PLC

Head Office

For Office Use Only									
Account No (s)									
Date	D	D	M	M	Y	Y	Y	Y	
Client Code									

To be filled by Directors / Partners / Sole Proprietors / Office bearers of Clubs & Societies / Trustees / Attorneys / Administrators / Executors etc. as the case maybe.

Personal Details	
Full name: Mr/Mrs/Miss/Dr/Rev	
National Identity Card No (NIC)	
<i>(Indicate valid Passport Number in the case of Foreign Nationals)</i>	
Date of Birth	D D M M Y Y Y Y
Nationality	<input type="checkbox"/> Sri Lankan <input type="checkbox"/> Resident <input type="checkbox"/> Non Resident Country of Residence
	<input type="checkbox"/> Sri Lankan with dual citizenship Country <input type="checkbox"/> Foreign National with dual citizenship / resident in or employed in Sri Lanka Country VISA Expiry Date.....

Contact Information	
Permanent address (if the address differs from the identification document, please enclose a billing proof)	
Contact No	Res: _____ Mobile: _____ Office: _____
E-mail	

Employment Information	
Name and Address of Employer or the Establishment in which the individual hold a position as stated below	
Status / Position held in the establishment which maintains the Account Relationship with the Company	<input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Others (Specify)
	<input type="checkbox"/> Proprietor <input type="checkbox"/> Office bearer

Average Monthly Income		
<input type="checkbox"/> Less than 50,000	<input type="checkbox"/> 100,001 to 250,000	<input type="checkbox"/> 500,001 to 1,000,000
<input type="checkbox"/> 50,001 to 100,000	<input type="checkbox"/> 250,001 to 500,000	<input type="checkbox"/> More than 1,000,000

Other Information	
Source of Wealth: (Wealth generated from)	<input type="checkbox"/> Business/ Ownership <input type="checkbox"/> Inheritance <input type="checkbox"/> Investments <input type="checkbox"/> Other (Specify)
	<input type="checkbox"/> Profession/ Employment
Other connected Business/ Professional activities and Interest	
Are you or any of your immediate family a politically exposed person (PEP)?(Refer definition below)	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes please specify	

FIU Definition
PEP's (Politically Exposed Persons) - Individuals in Sri Lanka or abroad who are or have been entrusted with prominent public functions. E.g. Head of State or Government, Senior politicians, Senior Government, Judicial or Military Officials, Senior Executives of state owned corporations, important political party officials.
Immediate Family Member - Includes the spouse, children and their spouses or partners, parents, siblings and their spouses and grandchildren and their spouses.

Declaration of the Customer / Suppliers
I confirm that the details given above are true and correct.

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Signature Date

Company officer must obtain a certified photo copy of the identification document and address proof (if required). If it is not certified, certify same as original seen.

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Documents Reviewed by..... (Signature) Emp No

Authorized by..... (Signature) Emp No

System Entry

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Input by

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Checked by

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Activated by

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Scanned by