

**PEOPLE'S LEASING & FINANCE PLC**

..... **Branch**

As required under the Financial Institutions (Customer Due Diligence) Rules, No. 01 of 2016 issued by the Financial Intelligence Unit of Central Bank of Sri Lanka in terms of Section 02 of the Financial Transactions Reporting Act, No 06 of 2006.

Customer Due Diligence (CDD) Form – Companies								
For Office Use Only								
Date	D	D	M	M	Y	Y	Y	Y
Client Code								

Details of Company		
Name of Company		
Nature / Purpose of Business		
Registered Address		
Country of Incorporation		
Date of Incorporation		
Total No. of Directors		Company Registration No
Name of the Company Secretary		

Tax Declaration		
The following is a mandatory declaration which is required to be completed under the Inland Revenue Regulations		
Income Tax File No		VAT Tax File No

Purpose for opening the account and the usage	
<input type="checkbox"/> Business Transactions	<input type="checkbox"/> Investment <input type="checkbox"/> Other Special Purpose (Specify) .....

Details of all the Directors	
<b>01</b>	
Name (Mr/Mrs/Ms/.....)	
Address	
NIC No	
Position Held	
<b>02</b>	
Name (Mr/Mrs/Ms/.....)	
Address	
NIC No	
Position Held	
<b>03</b>	
Name (Mr/Mrs/Ms/.....)	
Address	
NIC No	
Position Held	
<b>04</b>	
Name (Mr/Mrs/Ms/.....)	
Address	
NIC No	
Position Held	
<b>05</b>	
Name (Mr/Mrs/Ms/.....)	
Address	
NIC No	
Position Held	
<b>06</b>	
Name (Mr/Mrs/Ms/.....)	
Address	
NIC No	
Position Held	

**Details of Shareholders with 10% or More Voting Rights**

<b>01</b>				
Name				
Permanent / Registered Office Address				
NIC/ Business Registration No		Legal Nature	Individual	Legal Entity
Nationality/ Country of Incorporation				
Number of Shares		Voting Rights as a percentage (%)		
<b>02</b>				
Name				
Permanent / Registered Office Address				
NIC/ Business Registration No		Legal Nature	Individual	Legal Entity
Nationality/ Country of Incorporation				
Number of Shares		Voting Rights as a percentage (%)		
<b>03</b>				
Name				
Permanent / Registered Office Address				
NIC/ Business Registration No		Legal Nature	Individual	Legal Entity
Nationality/ Country of Incorporation				
Number of Shares		Voting Rights as a percentage (%)		
<b>04</b>				
Name				
Permanent / Registered Office Address				
NIC/ Business Registration No		Legal Nature	Individual	Legal Entity
Nationality/ Country of Incorporation				
Number of Shares		Voting Rights as a percentage (%)		

**List of Subsidiaries/ Other Connected Business Associates**

<b>01</b>			
Name of Company			
Registered Address			
Nature of Business			
Business Registration No		Percentage (%) of Voting Rights held by the Company	
<b>02</b>			
Name of Company			
Registered Address			
Nature of Business			
Business Registration No		Percentage (%) of Voting Rights held by the Company	
<b>03</b>			
Name of Company			
Registered Address			
Nature of Business			
Business Registration No		Percentage (%) of Voting Rights held by the Company	

**Financial Information**

Note: If a new establishment, the projected financial data should be completed under the caption "Current Year"

Are the Audited Financial Statements for last two years available?	Yes	No
<b>Description (Rs)</b>	<b>Current Year</b>	<b>Previous Year</b>
Annual Sales Turnover		
Net Profit/ Loss		
Paid-up Capital and Accumulated Profit		

**Source of Funds Expected Source and Nature of Credits into the Account**

Business Profits     
  Commission Income     
  Interest/ Investment Income     
  Sale/ Business Turnover  
 Sale of property/assets     
  Others (Please specify) .....

### Anticipated Monthly Cash Flows to the Account

- Less than Rs. 500,000                       Rs. 500,001 to Rs. 1,000,000                       Rs. 1,000,001 to Rs. 5,000,000  
 Rs. 5,000,001 to Rs. 10,000,000                       Rs. 10,000,001 to Rs. 25,000,000                       Rs. 25,000,001 and above

### Assets Owned by the Company (Not required, if the Latest Audited Accounts are available)

- Property/Premises     Investments     Motor Vehicles     Financial Assets     Others (specify) .....

### Expected Mode of Transactions/ Delivery Channels

- Cash                       Cheque                       Electronic Fund Transfer                       Other (Specify) .....

(tick '√' all that applicable)

We forward herewith the following documents relevant to the account opening request  
(Tick '√' as appropriate)

	Enclosed	Not Applicable
Certified Copy of Certificate of Incorporation		
Certified Copy of Application for Registration of a Company (Form – 1) or Application for Registration of an Existing Company (Form – 40)		
Certified Copy of Form – 20 (Change of Directors / Secretary and Particulars of Directors / Secretary)		
Certified Copy of Form – 13 (Change of Registered Office Address, if any)		
Certified Copy of Articles of Association		
Certificate to commence business (for Public Quoted Companies)		
Certified Copy of Board Resolution authorizing the opening of the account and Authorized Signatories (as per the format provided)		
Certified Copy of National Identity Card / Driving License / Valid Passport copies of all Directors and Authorized Signatories		
Company KYC Form		
Individual KYC Forms of all Directors		
Latest Audited Accounts, if available		
Certified Copy of Form - 44 (Full address of the registered or principal office of a company incorporated outside Sri Lanka and its principal place of business established in Sri Lanka)		
Certified Copy of Form - 45 (List and particulars of the Directors of a company incorporated outside Sri Lanka with a place of business established in Sri Lanka)		
Copy of the Board of Investment Agreement if a Board of Investment approved company		
Copy of the Export Development Board (EDB) approved letter if EDB approved company		

We confirm that the information provided above is correct and accurate and we are duly authorized to provide the information referred to above on behalf of the company. We further undertake to keep People's Leasing & Finance PLC duly informed, as soon as possible, of change to the information provided above.

Name		Name	
Designation		Designation	
Signature on Rubber Stamp		Signature on Rubber Stamp	
Date	D   D   M   M   Y   Y   Y   Y	Date	D   D   M   M   Y   Y   Y   Y

**For Office use Only**

**If customer is opening an account at a branch that is away from their permanent address.** Please mentioned the reason:

.....

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

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

**System Entry**

.....  
Input by

.....  
Checked by

.....  
Activated by

.....  
Scanned by

**Savings Account**

**Nominee Details**

Full name : Mr/Mrs/Miss/Dr/Rev/Master  
(Please underline the title)

National Identity Card No (NIC) / PP / DL / BC

NIC Issued Date

*(Indicate valid Passport Number in the case of Foreign Nationals)*

Contact No.

Ownership (%)

Date of Birth

D D M M Y Y Y Y

Nationality

- Sri Lankan
  - Resident
  - Non Resident - Country of Residence .....
- Sri Lankan with Dual Citizenship - Country .....
- Foreign National with dual citizenship / resident in or employed in Sri Lanka  
Country .....
- VISA Expiry Date.....

I / We confirm hereby that the details given above are true and correct

.....  
Signature of Authorized Person  
(With Rubber Stamp / Company Seal)

.....  
Signature of Authorized Person  
(With Rubber Stamp / Company Seal)

.....  
Date

.....  
Date

**Office Use Only**

Account No.

System No.



