AML QUESTIONNAIRE - INDIVIDUALS

Customer	Name		Civil reg. No.
	Address		Phone
	Postal code & City		Mobile
	Position		E-mail
	Nationality	Tax obligations	
Certificate of identity (must be documented)	Personal ID No. / Passport No./ Driving licence No.		
Politically exposed person (should only be answered if the customer is living abroad)	Are you or any family member(s) politically exposed? ☐ Yes ☐ No		
Purpose	What is the intended purpose of the customer relation (cross all that apply) ? ☐ Wages ☐ Stocks ☐ Property ☐ Credit Card(s) ☐ Savings ☐ Loans ☐ Administration Deposits ☐ Other Other - Please supply further		
Deposit	Will you make regular cash deposits and large amounts (i.e. DKK 10.000 or more) ? ☐ Yes ☐ No If yes, please elaborate on the amounts and their origins		
Recipient	Will you be using the customer relation for transactions that will be whitdrawn in cash by the recipient ? ☐ Yes ☐ No If yes, please elaborate on these transactions and, if possible, on the identity of the recipient		
Turnover	What is the expected monthly turnover of the account (gross amount) ? DKK.		

Origin	Are you the final owner of the financial property that will be deposited to or otherwise pass through your account ?
	☐ Yes ☐ No
	If no, who is the final owner of the financial property ?

Name	
Address	
Postal code	City
Country	Phone/mobile
Personal ID No.	Passport No.

	Please state your reason for participating on behalf of a third party
	If you are not the final owner of the financial property, the person in question must document his/her identity and also answer this questionnaire
Contact	I permit Norðoya Sparikassi to contact me by e-mail or phone in conjunction with implementation of new relevant services and the like
	☐ Yes ☐ No

I hereby certify on my honor that the information submitted to Norðoya Sparikassi is correct and comprehensive.

City and date   /   -

_____
Client's signature

Enclosed documents: Copy of certified identification documents