

HELM TRUST COMPANY LIMITED

NOTES TO CLIENTS ON DUE DILIGENCE REQUIREMENTS

Jersey prides itself on its position as one of the most respected of the Offshore Jurisdictions. In order to maintain this position and to keep in line with more stringent “know your client” regimes throughout the world we are required by our Regulators to keep records on all clients and the transactions that are undertaken by them or on their behalf. Only in this way can we help to ensure that the Island is not used for money laundering.

The purpose of this note is to explain what is required in the way of documentation. We apologise for those situations where we need to request information from clients who have been known to us for a long time, but I am afraid there is no substitute for holding the necessary documentation on file. **IF COMPLETE AND SATISFACTORY DUE DILIGENCE DOCUMENTATION IS NOT FORTHCOMING THEN WE ARE NOT ABLE TO CONTINUE WITH THE BUSINESS RELATIONSHIP.**

WHO DO WE NEED TO DILIGENCE?

We are required to carry out diligence on all of the following persons:

COMPANIES

Beneficial owners / ultimate clients of the shares
Directors
Any person with power to instruct the directors

FOUNDATIONS

Founder
Guardian / Enforcer
External Foundation Council Members
Beneficiaries
Any other external party

TRUSTS

Any settlor (any person who adds assets to the settlement regardless of whether they are named in the deed)
Any principal beneficiary (i.e. a person who has a life interest)
Any other beneficiary before a payment can be made to them.
A protector with power to direct, influence or guide the Trustees.

WHAT IS REQUIRED FOR EACH OF THE PARTIES?

A copy of your passport or identity card. If this is not handed to us at a face to face meeting, then the copy must be certified by a professional person such as a Notary, Lawyer, Accountant, Doctor, Bank Official, Police Officer or Government Official, **who must also confirm that the photograph is a true likeness**. The certifier should also add their official stamp with their contact details. **FOR EASE OF VERIFICATION A FORM HAS BEEN SUPPLIED BELOW WHICH CAN BE COMPLETED AND ATTACHED TO THE DOCUMENTS BEING VERIFIED.**

Evidence of your address. Please supply original or certified copies of two recent utility bills that show your address. The bills should be from different providers e.g. an electricity and a telephone (non mobile) bill. If two utility bills are not available then one utility bill and a bank statement will be acceptable. The documents must not be more than three months old. **THE DOCUMENTS MUST PROVIDE EVIDENCE OF THE PHYSICAL ADDRESS AT WHICH YOU ARE RESIDENT. A DOCUMENT SHOWING ONLY A P.O. BOX ADDRESS IS NOT SUFFICIENT.**

ADDITIONAL DOCUMENTATION

We require the principal client (i.e. the settlor or beneficial owner) to complete all parts of our standard application form and in particular those questions on the source of funds. Should Helm Trust Company Limited agree to accept the business once all due diligence procedures have been completed then we will send you a letter setting out our terms of engagement on which basis the business will be carried out. It is not necessary for you to sign our letter of engagement. Your continuing instructions to Helm Trust Company Limited will constitute your acceptance. We apologise for any inconvenience caused and would appreciate your assistance in providing the necessary documentation at an early stage to prevent additional costs being incurred in obtaining the information.

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COVER SIGN-OFF FORM FOR VERIFIERS OF DILIGENCE

IMPORTANT

THIS FORM CAN BE PRINTED AND ATTACHED TO THE DOCUMENTS BEING VERIFIED.
BUT **THE VERIFIER MUST ALSO SIGN AND DATE THE DOCUMENT BEING VERIFIED**

Name of person being verified: _____

Items being verified: _____

I confirm that I have seen the originals of the attached documents, which I have signed and dated as verified.

I confirm that these copies are true and complete copies of the original documents and I confirm that where applicable the photograph contained in the document bears a true likeness to the named individual.

Signed : _____

**PLEASE ALSO SIGN AND DATE THE
DOCUMENT BEING VERIFIED**

Name: _____

Date: _____

Qualification: _____

Address: _____

Office stamp: