



## DUE DILIGENCE FORM

**THIS FORM MUST BE COMPLETED BY THE INDIVIDUAL/S INTENDING TO FINANCE THE PURCHASE  
 IF MORE THAN ONE PERSONS ARE BIDDING TOGETHER, PLEASE FILL OUT SEPARATE FORMS**

Address of property for which bid is being placed: \_\_\_\_\_

Bid Amount (Figures) \$ \_\_\_\_\_

Bid Amount (Words) \_\_\_\_\_

**BIDDER NAME:** \_\_\_\_\_

Present Address: \_\_\_\_\_

Phone No: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer Name & Address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

**\*Copies of two (2) forms of government issued identification must be submitted. (tick against documents attached)**

Document Type	Date Of Issue	Number
<input type="checkbox"/> Valid National Identification Card		
<input type="checkbox"/> Valid Driver's Permit		
<input type="checkbox"/> Valid Passport		
<input type="checkbox"/> Other: _____		

**\*Proof of Address not older than three (3) months must be submitted, please submit a copy of any one of the following: (tick against documents attached, if the bill is not in your name, please include a letter of authorization from the owner.)**

Electricity Bill                       Water Bill                       Bank Statement                       Cable Bill

**POLITICALLY EXPOSED PERSONS**

A politically exposed person (PEP) is one who has been entrusted with prominent functions, for example a Head of State or of Government, senior politicians, senior government, judicial or military officials, senior executive of state-owned corporations, important political party officials. This also includes immediate family members, close personal and professional associates of a politically exposed person.

Are you a member of the Government/Opposition, Judicial or Military Official, Senior Executive of State-Owned corporations either domestically or by a foreign country? YES  NO

Are you a director of a State Board? YES  NO

Are you a family member (spouse, parent, sibling, child) of any of the above? YES  NO

**If yes to any of the questions above, please provide details:** \_\_\_\_\_

**DECLARATION**

By reason of the requirement of the Proceeds of Crime Act 2000, (as amended by the Proceeds of Crime (Amendment) act 2009), the Anti-Terrorism Act 2005 (as amended by the Anti-Terrorism (Amendment) Act 2010), the Financial Intelligence Unit of Trinidad and Tobago Act 2009, (as amended by the Financial Intelligence Unit of Trinidad and Tobago (Amendment) Act 2010), the Financial Obligations Regulations 2010 and the Financial Intelligence Unit of Trinidad and Tobago Regulations 2011 (collectively referred to as the “AML Legislation”), the National Insurance Property Development Company Limited Compliance Programmed requires that it be satisfied as to the identity of clients and their source of funds before conducting any transactions. Consent is hereby given to the National Insurance Property Development Company Limited to disclose the information contained herein which in the opinion of the National Insurance Property Development Company Limited is required to be disclosed by law.

Form must be completed and signed by the Purchaser and reviewed by the Broker and the Compliance Officer for customer acceptance.

I/We hereby certify the above information is true and correct to the best of my/our knowledge and belief. I/we have provided copies of the originals for verification of the information provided above in accordance with the applicable AML Legislation in Trinidad and Tobago.

Full Name of Bidder	Signature	Date

**FOR OFFICIAL USE ONLY**

UN1267 LIST checked  FATF LIST checked  NCCT LIST checked

RISK ASSESSMENT - Low Risk  High Risk

Checked and approved by Broker/Compliance Officer: \_\_\_\_\_ Date: \_\_\_\_\_