



**SOURCE AND PURPOSE OF FUNDS DECLARATION
(For non-individuals)**

*This document has been created to serve as a declaration of the primary source of funds.
It is to be completed by the client.*

Date

Name of legal entity
 Registration number
 of legal entity Industry sector
 Nature of business activity
 Name of representative Identification number of representative

LEGAL ENTITIES		
<input type="checkbox"/> Trust OR <input type="checkbox"/> Other (this includes any form of legal entity not provided for on this form) (name form of entity)	Expected monthly turnover ..N\$N\$ Amount ..N\$	An individual that has been authorised to act on behalf of a trust or any other form of legal entity must complete this section.
<input type="checkbox"/> Company	Name under which company conducts business in country of incorporation Name under which company conducts business in Namibia Expected monthly turnover ..N\$ Additional funds source (if applicable) ..N\$ Amount ..N\$	An individual that has been authorised to act on behalf of a company must complete this section.

USE OF ACCOUNT BY THIRD PARTIES

This section to be completed if the prospective client is / will be acting on behalf of another person

<input type="checkbox"/> Will the account be utilized by the account holder only, or will any third party at any time also be making use of the account? <input type="checkbox"/> Yes <input type="checkbox"/> No If the answer to the above is YES, please complete the following checklists in respect of any such third party who will be making use of the account: <input type="checkbox"/> If the third party is an individual person, complete the <i>Checklist – Individuals</i> in respect of the individual person <input type="checkbox"/> If the third party is a listed company, complete the <i>Checklist – Listed Company</i> in respect of the company <input type="checkbox"/> If the third party is a company regulated by Namfisa, complete the <i>Checklist – Companies regulated by Namfisa</i> in respect of the company <input type="checkbox"/> If the third party is a state-owned enterprise, complete the <i>Checklist – State-owned Enterprises</i> in respect of the enterprise <input type="checkbox"/> If the third party is a non-listed company, complete the <i>Checklist – Non- Listed Company</i> in respect of the company <input type="checkbox"/> If the third party is a close corporate, complete the <i>Checklist – Close Corporation</i> in respect of the company <input type="checkbox"/> If the third party is an “other legal entity”, complete the <i>Checklist – Other Legal Entity</i> in respect of the entity <input type="checkbox"/> If the third party is a partnership, complete the <i>Checklist – Partnerships</i> in respect of the partnership <input type="checkbox"/> If the third party is a trust, complete the <i>Checklist – Trust</i> in respect of the trust	This section is to be completed by an individual to confirm whether or not the account is to be used by the individual, or whether it is envisaged that any third party will in future also be able to utilize the account at any time.
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DECLARATION BY CLIENT

I, (full names),
Identification number hereby confirm that I am authorised to act on behalf of
..... (legal entity name) registration
..... number ,
and that the information supplied at the date of this document is correct.

Signature Date (ddmmyyy)