CUSTOMER DUE DILIGENCE FORM – FOR CORPORATE

Eagle Insurance Limited ("EIL") is dedicated to protecting the confidentiality and privacy of information entrusted to it. As part of this fundamental obligation, EIL shall comply with all obligations imposed under applicable data protection and privacy laws. Where applicable, EIL will treat any personal information about you in accordance with the Data Protection Act 2017. When you complete any of our forms, EIL is collecting your personal data that EIL require to comply with our legal and regulatory obligations. EIL will use your personal data to fulfil the services you may require and may also need to disclose information in accordance with statutory regulations or for other lawful reasons.

By signing our forms, you give your consent for your personal data to be processed by us or any party authorised to do so, on our behalf. You may access the EIL Data Protection Statement by visiting this link: https://www.eagle.mu/data-protection.

Please fill in the form with due care and true information.

COMPANY DETAILS		
Company Name		
BRN / FSC Licence Number		
Company VAT Registration Number		
Country registered	☐ Mauritius ☐ other, (specify):	
Address of Company		
Telephone No	Company:	Mobile:
E-mail Address		
Date of Incorporation		
Type of Company	☐ Corporation ☐ Partnership ☐ Joint Venture ☐ Trust ☐ Other (Specify):	
Nature of Business		
Number of years in Business		
Previous Financial Year Turnover	☐ Less than Rs 50,000,000 ☐ Rs 50,000,000 – Rs 300,000,000 ☐ Rs 300,000,000 – 600,000,000 ☐ Rs 600,000,000 – 1,000,000,000 ☐ Above Rs 1,000,000,000 ☐ Rs 0 Newly set up ☐ No Revenue	

DIRECTORS

2 DIRECTORS		
Name of Director	**ID Number**	**PEP* Yes/No**

**A PEP is a person who has been entrusted with prominent public function, foreign, domestic and international organisation, as well as close relative or associates of such persons. For example: Prime minister, President, CEO of a parastatal body, Commission of police, Member of Parliament.*

MAJOR SHAREHOLDERS

5 MAJOR SHAREHOLDERS			
Percentage of shareholding	**Name of Shareholder**	**Nationality**	**PEP Yes/No**

ULTIMATE BENEFICIAL OWNER

Who is the Ultimate Beneficial Owner* of the company?

*Refers to the natural person(s) who ultimately owns or controls a legal entity and/or the natural person on whose behalf a business is being conducted. This also includes those natural persons who exercise ultimate control over a legal person or arrangement and such other persons as may be specified in Regulations 6 and 7 of FIAML Regulations 2018.

ULTIMATE BENEFICIAL OWNERS		
Name of Ultimate Beneficial Owner	**Nationality**	**PEP Yes/No**

DECLARATION

I, as authorized by the company, hereby declare and certify that the information furnished above are true and accurate to the best of my knowledge and I undertake to inform you of any changes therein, immediately in good faith. In case of the above information is found to be false or inaccurate or misleading or misrepresentative, I am aware that I may be held liable for it. I hereby authorise sharing of the information furnished in this form as may be requested by a regulator.

I further declare that any transaction with Eagle Insurance Limited to which I am subscribing is not connected to Money Laundering or any other illegal activities directly or indirectly.

Date	
Name	
Job Title	

Signature:

Mandatory Certified* Documents to be submitted.

- ☐ Certificate of Incorporation
- ☐ Business Registration Number Certificate
- ☐ FSC Licence (if applicable)
- ☐ Proof of Address of Company (POA) **less than 3 months** old (Utility bill **or** a recent Bank or credit card statement or a recent bank reference)
- ☐ List of Directors
- ☐ List and Percentage of Shareholding structure, including identification of Beneficial Owners and NIC/Passport and Proof of Address of Natural Persons identified.
- ☐ List of Authorised Signatories
- ☐ KYC Documents on at least 2 Directors
    1. National Identity Card or Current Valid Passport
    2. Proof of Address of less than 3 months old (Original Utility Bill, Bank statement or Bank reference) -

*Certification should be done by a suitable person such as a: Lawyer, notary, actuary or an accountant or any person holding a recognized professional qualification, director or secretary of a regulated financial institution in Mauritius or in equivalent jurisdiction, a member of the judiciary or a senior civil servant. .

The certifier should sign the copy document, date the certification and clearly indicate his name, address and position or capacity on it together with contact details (address, email and telephone) to aid communication with the certifier, as required.