

KNOW YOUR CLIENT FORM – Natural Person (Individual)

(*KYC Client form to be filled separately for each Shareholders / Partners / Authorized Representative)

SECTION A: PERSONAL DETAILS		Company Account No:	
Full Name (First or Given names as shown in passport)			
Date of birth:		Gender:	
Passport number:		Nationality (as passport)	
Passport Issue date:		Passport Expiry	
Your current office or work (Physical) address: Door / Floor No /Building Name: Street / Road Name: Region/ Area , Province / State, PO Box/ ZIP			
Country:		Telephone:	Fax:
Email:		Website:	Mobile:
Current residential (Physical) address: Door / Floor No /Building Name: Street / Road Name: Region/ Area, Province / State, PO Box/ ZIP			
Country:		Telephone:	Fax:
Email:		Website:	Mobile:
What is your preferred means of communication in relation to this KYC Form?		Telephone/Email	
Are you Politically Exposed Person (PEP1)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, particulars of the same.			
Whether any prosecution / detention/ fine/ conviction/ sentence against you has been awarded by any court of law for any offence?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, particulars of the same:			
How are you associated with shareholder(s) - if more than one shareholder? :			
Name of shareholder	Relationship (Employer/Colleague/ Relative / Friends)	No of year known	
<input type="checkbox"/> I hereby warrant that the information supplied by me is true and accurate and acknowledge that any misrepresentation by me may result in my prosecution.			
Authorized Signatory:		Name: Date:	

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