

# Partnership Account Opening Checklist

*For partnerships only*

**Customer Name:** \_\_\_\_\_

**Document Guidelines (See [www.bcb.bm/information-centre/](http://www.bcb.bm/information-centre/) for required forms)**

- Please provide original or certified copies of documents pursuant to BCB's Certification Guidelines in **FORM J**
- Include this Checklist with your application forms

**A - Account opening documents**

- Completed Corporate Application Form
- Complete Certified Resolution Excerpt Authorising Bank Account Opening (**FORM D**) or submit equivalent resolution
- Complete Certified Resolution Excerpt Approving Authority to Manage Accounts (**FORM E**) or submit equivalent resolution
- Complete Authorised eBanking Users form (**FORM I**) (if applicable)
- Complete Authorised Signatories for Bank Account form (**FORM H**) to identify all "Authorised Signatories"
- Complete Call Back Authorised Contact Information (**FORM F**) for each Authorised Contact (e.g. Authorised Person, Authorised Signatory, Authorised ebanking User) (if applicable)
- Complete Facsimile (Fax)/Email Indemnity Form (**FORM G**) if you wish to instruct BCB via Fax or Email
- Complete Entity Self-Certification for Tax Purposes (**FORM P**)

**B - Other required documents**

- Certificate of formation/incorporation or equivalent
- Certificate of Name Change (if applicable)
- Certificate of Re-domiciliation (if applicable)
- Partnership Deed or Agreement
- Partnership registers of the customer
- Complete Certificate of Incumbency (**FORM B**) or provide equivalent documentation
- Current listing of the company registry or certificate of good standing to evidence existence of company
- Copy of most recent financial statements (audited version, if audited). For newly incorporated entities (under 12 months), a copy of the projected financials is required.

**Verification of Address(es) (Document verifying P.O. Box address is not acceptable).**

*Document should be less than 3 months old at the time of account opening and in name of the customer*

- Proof of registered address (e.g. Certificate of formation or a written confirmation from the partnership secretary or equivalent document)
- Proof of operating business/principal place of business (if different from registered address) through any one of the below:
  - Utility bill which indicates a service address (excluding cell/mobile phone bills);
  - Bank or credit card statement from a recognized bank in Bermuda (excluding BCB) and not an electronic copy;
  - Confirmation of address via a Government website;
  - Original certified copy of a Government issued tax number notification letter;
  - Letter from another bank with which the customer has a business relationship and which is subject to equivalent regulations confirming identity and address

**If company is owned by other organization(s)**

- If company is owned by other organization(s) provide current company ownership structure chart which indicates percentage ownership and jurisdiction of each entity and controlling person in the structure. A director/company secretary must date, sign and certify ("I certify that this document is a true and accurate representation of the organizational structure").
- Complete Supplementary Information Form (**FORM A**) if company is owned by other organization(s)

**If Company is a Fund (mutual fund, hedge fund, private equity fund, pension fund, etc.)**

- Administrator AML/ATF Certificate for due diligence effected on the investors - signed by the Administrator
- Evidence that the Fund Administrator is regulated (if applicable)
- Evidence that the Investment Manager is regulated (if applicable)
- Fund Prospectus and Offering Memorandum
- Fund Administration Agreement
- Investment Management Agreement

<b>If Company is a regulated financial institution</b>	
<input type="checkbox"/>	Evidence of regulated status from the regulatory authority website or certified copy of the applicable licenses showing regulatory body reference number
<b>C - Enhanced Due Diligence Documents - not for all customers, subject to bank policy</b>	
<input type="checkbox"/>	You may be asked to complete an Enhanced Due Diligence questionnaire ( <b>FORM K</b> ), subject to BCB's review of your account application form. The Relationship Manager will advise you separately if <b>FORM K</b> is required.
<input type="checkbox"/>	If you are asked to complete <b>FORM K</b> , you need to provide documentation to verify the company's Source of Funds and Source of Wealth as outlined in <b>FORM K</b> .
<b>D - Persons who own or control the customer ("Involved Person")</b>	
<ul style="list-style-type: none"> <li>- individuals who directly or indirectly own or control <u>in aggregate 10% or more</u> of the customer;</li> <li>- individuals such as signatories, director, CEO, principal, nominee, liquidator;</li> <li>- individuals with power of attorney or proxy (parties with voting rights);</li> <li>- individuals with control over management or purporting to act on behalf of the entity or by whom binding obligations may be imposed on the entity.</li> </ul>	
<input type="checkbox"/>	Complete Details of Owners and Controllers Form ( <b>FORM C</b> ) for <u>each</u> Involved Person
<input type="checkbox"/>	Power of attorney with the scope of the mandate granted (if applicable)
<input type="checkbox"/>	Nominee Agreement (if applicable)
<b>Verification of identity for <u>each</u> Involved Person</b>	
<input type="checkbox"/>	For Non-Bermudian individuals only: Valid Passport
<input type="checkbox"/>	For Bermudian Nationals only: Any one of the following National ID documents: <ul style="list-style-type: none"> <li>- Passport;</li> <li>- Drivers' license;</li> <li>- Special Person Card</li> </ul>
<b>Verification of Residential Address for <u>each</u> involved person (Document verifying P.O. Box address is not acceptable).</b>	
<i>Document should be less than 3 months old at the time of account opening and in name of the customer</i>	
<input type="checkbox"/>	Any one original or certified copy of: <ul style="list-style-type: none"> <li>- Utility bill which indicates a service address (excluding cell/mobile phone bills);</li> <li>- Bank or credit card statement from a recognized bank in Bermuda (excluding BCB) and not an electronic copy;</li> <li>- Letter from the tax department (land tax demand letter, bill or statement);</li> </ul>
<b>Involved Person is a Politically Exposed Person ("PEP")</b>	
<input type="checkbox"/>	If any Involved Person is a person, an immediate family member of a person or a close associate of a person who is or has been entrusted with a prominent public function by a foreign country or territory outside Bermuda (Foreign PEP), in Bermuda (Domestic PEP) or by an international organisation (International Organisation PEP) a company representative must complete <b>FORM K</b> and the Involved Person must complete <b>Appendix 1</b> of <b>FORM K</b> .
<b>E - General Partner and entities that own or control in aggregate 10% or more (directly or indirectly) of the customer</b>	
<input type="checkbox"/>	Share register of each company up to the ultimate beneficial owner e.g. individual person or publically traded company
<input type="checkbox"/>	Certificate of Incorporation, listing of company registry or certificate of good standing of each relevant parent company
<b>F - Trusts that own or control in aggregate 10% or more (directly or indirectly) of the customer</b>	
<input type="checkbox"/>	For all trusts in the ownership structure with 10% or more controlling interest (directly or indirectly) complete Trust checklist Section B.

<b>FOR BANK USE ONLY</b>	
Date Received in BCB:	Account Manager Name:
Customer Name:	CIF Number (if applicable):
Name of Reviewer:	Date of Review & Signature of Reviewer:

### Submitting the application

Once completed, please return the application and accompanying documents to your Relationship Manager.

[www.bcb.bm](http://www.bcb.bm)

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1 Sept 2018