

Schedule

FORM 1

THE ANTI-MONEY LAUNDERING ACT, 2013

THE ANTI-MONEY LAUNDERING REGULATIONS, 2015.

Regulations 4(2).

REGISTRATION FORM FOR ACCOUNTABLE PERSONS

I/ We _____ being an accountable person as listed in the second Schedule to the Act, apply to register with the Authority.

PART I- Particulars of the accountable person in case of an Individual.

Name of the accountable person: _____

Age: _____

Date of birth: _____

Telephone number: _____

Postal address: _____

Email address: _____

Tax identification number: _____

National identification Number: _____

Profession: _____

Professional body/Industry (if any): _____

Physical Address: _____

**PART II- Particulars of the accountable person in case of legal entity/
corporate.**

Name of the accountable person: _____

Name of the representative: _____

Industry: _____

Date of incorporation or registration: _____

Registration Number: _____

Telephone number: _____

Postal address: _____
Email address: _____
Tax identification number: _____
Physical Address: _____

Name of the managing Director or CEO. _____

Tax identification Number of the managing director or CEO: _____

Signed..... (Accountable person)

Date.....

Received by..... Date.....

Notes: For purposes of corporations or other entities the proof of registration or incorporation of the accountable person should be attached.

FORM 3.

THE ANTI-MONEY LAUNDERING ACT, 2013.

THE ANTI-MONEY LAUNDERING REGULATIONS, 2015.

Regulations 6(2) and (7).

The Executive Director,
Financial Intelligence Authority.

**NOTIFICATION OF APPOINTMENT OF MONEY LAUNDERING
CONTROL OFFICER.**

TAKE NOTICE that, I /We _____
being an accountable person and required by the section 6(m) of Act and the
Regulations to appoint an money laundering control officer.

I/ We have appointed the following person as the money laundering control
officer.

Name of the officer: _____

The designation /title of the officer: _____

Telephone number of the officer: _____

Email address: _____

Physical address:

Employee ID Number: _____

Appointment date: _____

Money laundering control officer supervisor: _____

Designation of the supervisor: _____

Dated this _____ day of _____, 20 _____

Accountable person