



**FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM**

1. CLIENT DETAILS

Name of Firm\Individual: _____

Name of Contact: _____

2. CLIENT ADDRESS

Address: _____

Phone: _____

Email: _____

Website Address: _____

3. MAILING ADDRESS (if different from above)

Address: _____

4. CURRENT ACTIVITIES OF COMPANY (Please provide as much details as possible)

Own vessel

Own aircraft

Own Real Estate

Own Bank Account

Own Investment Portfolio

Hold Trust Assets

Investment Vehicle

Other: _____

5. ASSETS OWNED BY THE COMPANY (Please provide as much details as possible)

Cash at Bank

Stocks

Bonds

Real Property

Yachts/Boats

Other: _____

6. COMPANY DETAILS TO BE TRANSFERRED

Company Name: _____

Incorporation Number: _____ Incorporation Date: _____

Date License Fee was Paid: _____

Date Register of Director was Filed at Registry: _____

Service Address of Documents: _____

Name of Person Responsible for Service of Documents: _____

Countries of Operation (*Please state the principal **Country or Countries** in which the company operates*): _____
_____**7. COMPANY STRUCTURE** (*Please tick one*) Limited by Shares Unlimited (*Authorised to Issue Shares*) Limited by Guarantee
(*Authorised to Issue Shares*) Restricted Purpose Company Limited by Guarantee
(*Not Authorised to Issue Shares*) Segregated Portfolio Company**8. MEMORANDUM AND ARTICLES OF ASSOCIATION** Standard Format*(the objects of the company are to engage in activities that are not prohibited under any law for the time being in force in the British Virgin Islands. Our standard Memorandum provided only for the issue of registered shares)* Special object clauses (*please specify*)**9. AUTHORISED SHARES**

No. of Authorised Shares: _____

Standard 50,000 _____

Other _____

Par Value of Authorised Shares:

Standard \$1.00 Par _____

Other _____



FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM

10. SHARES CURRENTLY ISSUED

Please complete if company is authorised to issue shares

Name of shareholder/
Custodian of bearer shares _____

Address of Shareholder/
Custodian of bearer shares _____

No. of Share Certificates Issued _____ Number of Shares per Certificate _____

NOTE: It is customary for companies to be incorporated using Forward's standard memorandum and articles of association. Such companies are limited to shares with \$1.00 par value and are prohibited from issuing bearer shares.

Should you wish to incorporate a company with the provision to issue bearer shares, please note that all bearer share certificates must be deposited with an Authorised or recognized Custodian upon issue. Failure to do so will result in the immobilization of the bearer shares by law.

11. SOURCE OF FUNDS /WEALTH *(Please explain how the company's activities will be funded whether by funds of beneficial owner, loan, etc and also background information regarding client's entire body of wealth)*

- Business Profits
- Personal Savings
- Inheritance
- Dividends from Investments
- Other (specify) _____

SOURCE OF FUNDS – GENERAL

Please disclose **in sufficient detail**, from what source or sources the assets/funds that were introduced into the company were derived **(Please Note that Relevant Individuals are still required to each complete an individual Source of Funds Declaration in the Relevant Individual Due Diligence Form)**

Payment from clients for services provided and partially personal funds from the Owner.



**FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM**

12. a. APPLICANT PARTICULARS – (Natural Person):

(To be completed by any person acting as director, shareholder, beneficial owner or officer)

Name: _____

Address: _____

Mailing address (if different): _____

Date of Birth: _____ Nationality: _____

Passport No.: _____ Passport Expiration Date: _____

Passport Issuing Country: _____ Occupation: _____

Telephone: _____ Email: _____

Country of Tax Residence: _____

Director Shareholder Beneficial Owner Officer: _____
(Check all that apply) *State Position*

Number of Shares: _____

DO YOU HOLD DUAL/MULTI NATIONALITIES (if so list all nationalities)

Yes No

If yes, Nationalities: _____

Is Beneficial Owner a Politically Exposed Person or is closely related to or connected to a Politically Exposed Person. (a Politically Exposed Person (PEP) is defined by the Financial Action Task Force (FATF) as an individual who is or has been entrusted with a prominent public function.)

Yes No

(IF YES PLEASE EXPLAIN)



**FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM**

13. b. APPLICANT PARTICULARS – (Natural Person):

Name: _____

Address: _____

Mailing address (if different): _____

Date of Birth: _____ Nationality: _____

Passport No.: _____ Passport Expiration Date: _____

Passport Issuing Country: _____ Occupation: _____

Telephone: _____ Email: _____

Country of Tax Residence: _____

Director Shareholder Beneficial Owner Officer: _____
(Check all that apply) State Position

Number of Shares: _____

DO YOU HOLD DUAL/MULTI NATIONALITIES (if so list all nationalities)

Yes No

If yes, Nationalities: _____

Is Beneficial Owner a Politically Exposed Person or is closely related to or connected to a Politically Exposed Person. (a Politically Exposed Person (PEP) is defined by the Financial Action Task Force (FATF) as an individual who is or has been entrusted with a prominent public function.)

Yes No

(IF YES PLEASE EXPLAIN)



FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM

14. APPLICANT PARTICULAR - Corporate/Legal Entity:

(To be completed if shareholder is a corporate entity)

Full Name: _____

Registered Address: _____

Jurisdiction of Incorporation: _____

Incorporation Registration Number: _____

Date of Incorporation: _____

Name of Stock Exchange (if PLC) _____

Cusip Number or Equivalent Code (if PLC) _____

Director Shareholder Beneficial Owner Officer: _____ State Position
(Check all that apply)

Number of Shares: _____

15. Address and Records Locations:

Under current legislation, it is a requirement that you or Forward hold an original current list of directors and that you advise your Registered Agent (i.e. CCP) within fifteen (15) days of any changes. If you will maintain the Register of Directors, a copy must be provided to our office.

Address where corporate documents should be sent _____

Billing address for annual maintenance invoices Contact Name: _____ Telephone: _____ Fax: _____ Email: _____

Name of person who maintains and controls the Company's financial accounting records _____

Address where financial/accounting records Will be kept. _____

Forward can maintain the original records. **

Would you like us to do so?

Yes

No

****There is a fee for this service.**

Alternatively, Forward can also act as corporate director, through Forward Fiduciaries Limited**

Would you like for Forward to act as corporate director?

Yes

No

**** There is a fee for this service.**

Alternatively, Forward can act as shareholder**

Would you like for Forward to act as nominee shareholder?

Yes

No

If yes, indicate the number of shares to be issued to Forward Nominees Limited. _____

**** There is a fee for this service.**

Name and address of beneficial owner(s) of shares to be held by Forward Nominees Limited

Alternatively, Forward can act as Secretary or other officer. **

Would you like us to do so?

Yes

No

Position or office to be held by Forward Secretaries Limited?

**** There is a fee for this service.**

16. Please provide confirmation if there are any high risk factors associated with this Company

Yes

No

(IF YES PLEASE EXPLAIN) _____



17. POWERS OF ATTORNEY

Are any Powers of Attorney Granted or Proposed? Yes No

If Yes, Please provide details of the persons holding or intended to hold the Powers of Attorney.

Last Name : _____

First and Middle Name(s): _____

Street Address: _____

Street Address: _____

City: _____ **State/County:** _____

Country: _____ **Zip Code:** _____

Nationality: _____

Passport Number: _____ **Passport Expiration Date:** _____

Are the Powers General (i.e. without restriction) or Specific (i.e. with restrictions)

If Powers are specific or Restricted please provide details below:

Bank or Financial Institution Information:

Contact Person: _____



**FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM**

18. DECLARATION OF INFORMATION

Name _____

Address _____

I/We, the undersigned, being the beneficial owner (s)/acting as agent with full authority of the beneficial owner(s) of the company, request that Forward Associates Limited arrange for a service provider to provide Registered Agent and Registered Office Services to the Company, in accordance with its standard terms and conditions and accept the terms and conditions as are currently in force and accept that they may change from time to time.

I/We declare that the above BVI Business Company shall not engage in activities contrary to the laws of the British Virgin Islands as well as the laws applicable in any jurisdiction in which the Company may operate. I/We declare that the information stated herein is true to the best of my/our knowledge and belief and that I am/we are bound by the statements given herein.

I/We declare that the funds or assets referred to above are my personal property and at the time of transfer, I am/was or We are/were legally entitled to transfer such funds or assets.

I/We declare that no funds or assets have been derived from criminal activities of any nature whatsoever.

I/We confirm that should any changes occur to the information contained herein, I/we will immediately inform Forward Associates Limited

I/We agree to be bound by your standard fee scale, unless otherwise agreed.

Print Name below

Date:

Signed by Beneficial Owner/Agent

Print Name below

Date:

Signed by Beneficial Owner/Agent



**FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM**

METHOD OF PAYMENT TO FORWARD ASSOCIATES LIMITED:

BY WIRE TRANSFER:

Have your bank send funds to:

Banco Popular de Puerto Rico
1500 Ponce de Leon Avenue
Santurce, Puerto Rico 00901

Swift Code: BPPRPRSX
Routing – 021-502-011

For final credit to:

**FORWARD ASSOCIATES LIMITED
A/c # 185 111 345**

Please include an additional \$25 to cover recipient bank charges.

Reference: *(PLEASE INSERT COMPANY NAME or INVOICE NUMBER FOR IDENTIFICATION PURPOSES)*

WHEN PAYING VIA DRAFT OR CHEQUE

Please ensure that all cheques are drawn on a US bank. Cheques drawn on other banks will not be accepted.

MARKET RESEARCH

I learned of the services of Forward Associates Limited through:

Advertisement in _____

A referral from _____

Other (e.g. Website) _____

Should you require any additional information about Forward Associates Limited and its services, please contact following address:

**FORWARD ASSOCIATES LIMITED
Palm Grove House,
P.O. Box 658
Road Town, Tortola
British Virgin Islands**

DUE DILIGENCE REQUIREMENTS

In order to comply with the due diligence requirements in the British Virgin Islands, please have each beneficial owner(s), director(s), shareholder(s) and officer(s) provide the following:

1. A certified or notarized copy of the identification page of a valid passport. (The certification should include the notary's name and full contact details (the certification should state "I hereby certify that I have seen the original passport and this is a complete and accurate copy of the original. I hereby certify that the photograph in the passport bears a true likeness to (name of owner/director).
2. Original or a certified/notarized copy of a utility bill evidencing the permanent address of the owner/director. If certified/notarized, the notary's name and full contact details must appear on the document along with the following language (I hereby certify that I have seen the original utility bill and this is a complete and accurate copy of the original document) .
3. A reference letter from a bank or from a professional such as a lawyer or accountant. The letter must be presented on the individual's or firm's letterhead with full contact details visible. The letter must be addressed to **Forward Associates Limited** and confirms the length of time the beneficial owner/director/shareholder has been known to the referee (this must be at least two years prior to the beginning of this relationship) and state the quality of that relationship.

Where the proposed shareholder or director or officer is a company, the following will be required:

- a. A certified or notarized copy of the Certificate of Incorporation or other equivalent governing constitution;
- b. A certified or notarized copy of the Memorandum and Articles of Association or equivalent governing constitution;
- c. An authorized signatory listing (bearing specimen signatures);
- d. Copies of powers of attorney or other authorities given by the directors in relation to the company;
- e. An original Certificate of Good Standing;
- f. Certified or notarized copies of the Registers of Directors, Shareholders, Beneficial Owners and Officers;
- g. A signed directors' statement describing the company's principal place of business and the type and nature of the company's business engaged.

DOCUMENTARY EVIDENCE REQUIRED FOR ALL RELEVANT INDIVIDUALS

The following information is required for each Relevant Individual

- Proof of Physical Address
- One Professional Reference letter
- One Bank Reference letter
- Certified copy of an Approved Government photo ID Document (*passport, residence ID card or drivers licence*)
- Full name, address and contact details of any individual or professional body that has provided legal or tax advice to each Relevant Individual with regards to the current transfer request.



**FORWARD ASSOCIATES LIMITED
BVI COMPANY TRANSFER IN REQUEST FORM**

The following due diligence documentation on each director and each individual who owns ten percent or more of the company:

- **A certified or notarized copy of the identification page of a valid passport.** *(The certification should state "I hereby certify that I have seen the original passport and this is a complete and accurate copy of the original. I hereby certify that the photograph in the passport bears a true likeness to (name of owner/director).*
- **A certified/notarized copy or an original utility bill, bank statement or credit/debit card statement** addressed to the respective individual at the mailing address given; and,
- **An original reference from a banker or professional** (e.g. accountant or lawyer). *(The reference must state the length of the relationship with the bank or professional and that from personal knowledge or enquiries, the individual, is a suitable person with whom to do business. Such relationship must have existed for a minimum of two (2) year.)*