

## Introducer Certificate

**This certificate should be used only by introducers duly authorised in the United Kingdom and where the policyholder(s) is/are resident in the UK, Channel Islands or Isle of Man and the bond is being funded by a UK, Channel Islands or Isle of Man bank account.**

I/We confirm that I am/we are a business:

- based and/or incorporated in and/or formed under the law of the United Kingdom
- which has entered into a terms of business agreement with RL360° and undertakes to comply with these terms
- that has obtained the following information, required in order to comply with the the Isle of Man Government Insurance and Pensions Authority Guidance Notes on Anti-Money Laundering and Preventing Terrorist Financing for Insurers, as amended from time to time.

### Important notes

As an alternative to completing this form, you can provide RL360° with certified true copies of the identification and current residential address documentation you have obtained from the applicant.

The certifier must:

- Add the statement 'Certified as a true copy taken from the original'
- Sign and date the copy document on all pages
- Print their name clearly in BLOCK CAPITALS underneath their signature
- Record the capacity or position in which they are certifying the document
- Add their company name or official stamp or seal

The documents we receive must not be copies of previously certified documents.

Please note that RL360° reserves the right to request copies of the documentation noted in this form at any time.

Should the introducer completing this form cease trading or should the introducer company merge with another company, you should supply current certified true copies of the identification and address for the policyholder to RL360° immediately.

### Notes for guidance

- Sections 1 and 2 must be fully completed by the introducer.
- Sections 3, 4, 5 and 6. Please complete the sections that are relevant. To enable the application to be processed efficiently, please ensure that the relevant section is **fully completed**. If passports are not available, you must document the reason why in Section 3 and then document two separate and independent pieces of evidence in Section B and in Section C.
- All information used to document the verification of a client's address must be taken from the most recent document available which should ideally be dated no more than 3 months from the date of the bond application.
- These requirements are a direct result of the Isle of Man Government Insurance and Pensions Authority Guidance Notes on Anti-Money Laundering and Preventing Terrorist Financing for Insurers, a copy of which is available from RL360° on request.
- Please ensure the signatory box at the foot of the certificate is duly completed before submission.
- The application for business must be accompanied by payment from the applicant's personal bank account.

## 1. Introducer details

Full name of introducer	<input type="text"/>
Full address	<input type="text"/> <input type="text"/> <input type="text"/>
Postcode	<input type="text"/>
FCA number	<input type="text"/>

## 2. Applicant details

Name of applicant/trust/ company/corporate trust	<input type="text"/>
Name of parties who have been verified	A <input type="text"/> B <input type="text"/> C <input type="text"/> D <input type="text"/>

## 3. Individual applicants (single or joint ownership)

Please complete additional pages for section 3 if more than two applicants/trustees

### Applicant 1

Are passports details available?	Yes <input type="checkbox"/> (please complete <b>Section A</b> and <b>Section B</b> below)
	No <input type="checkbox"/> (please state reason and complete <b>Section B</b> and <b>Section C</b> below)
	Reason why passport details are not available <input type="text"/> <input type="text"/>

### Applicant 2

Are passports details available?	Yes <input type="checkbox"/> (please complete <b>Section A</b> and <b>Section B</b> below)
	No <input type="checkbox"/> (please state reason and complete <b>Section B</b> and <b>Section C</b> below)
	Reason why passport details are not available <input type="text"/> <input type="text"/>

### Section A Passport details

#### Applicant 1

Passport number	<input type="text"/>
Full name	<input type="text"/>
Expiry date (dd/mm/yyyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Place of birth	<input type="text"/>
Issuing authority	<input type="text"/>
Date and place of issue	<input type="text"/>
Please state date when the originals of the above were seen and copies taken (dd/mm/yyyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

#### Applicant 2

Passport number	<input type="text"/>
Full name	<input type="text"/>
Expiry date (dd/mm/yyyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Place of birth	<input type="text"/>
Issuing authority	<input type="text"/>
Date and place of issue	<input type="text"/>
Please state date when the originals of the above were seen and copies taken (dd/mm/yyyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

### 3. Individual applicants (single or joint ownership) continued

#### Section B Verification of client's address

##### Document used to verify the client's address

All information recorded below must be taken from the most recent document available which should ideally be dated no more than 3 months from the date of the bond application.

##### Applicant 1

(please tick one box and complete the document details below):

<input type="checkbox"/> Utility bill	<input type="checkbox"/> Tax assessment document
<input type="checkbox"/> Rates bill	<input type="checkbox"/> Current driving licence
<input type="checkbox"/> Bank statement	<input type="checkbox"/> Extract from the local telephone directory
<input type="checkbox"/> Bank credit card statement	<input type="checkbox"/> Extract from the official register of electors
<input type="checkbox"/> Mortgage statement	<input type="checkbox"/> Council Tax Bill
<input type="checkbox"/> A state pension, benefit book or other government produced document showing benefit entitlement (Please state which document was used)	<input type="text"/>

##### Document details

Issuing bank/authority/company	<input type="text"/>
Account number/reference number	<input type="text"/>
Place of issue (country/town)	<input type="text"/>
Date on document (dd/mm/yyyy)	<input type="text"/>

##### Applicant 2

(please tick one box and complete the document details below):

<input type="checkbox"/> Utility bill	<input type="checkbox"/> Tax assessment document
<input type="checkbox"/> Rates bill	<input type="checkbox"/> Current driving licence
<input type="checkbox"/> Bank statement	<input type="checkbox"/> Extract from the local telephone directory
<input type="checkbox"/> Bank credit card statement	<input type="checkbox"/> Extract from the official register of electors
<input type="checkbox"/> Mortgage statement	<input type="checkbox"/> Council Tax Bill
<input type="checkbox"/> A state pension, benefit book or other government produced document showing benefit entitlement (Please state which document was used)	<input type="text"/>

##### Document details

Issuing bank/authority/company	<input type="text"/>
Account number/reference number	<input type="text"/>
Place of issue (country/town)	<input type="text"/>
Date on document (dd/mm/yyyy)	<input type="text"/>

### 3. Individual applicants (single or joint ownership) continued

#### Section C Verification of client's address (to be completed only where a passport is not available)

**This section must be completed along with Section B where you have been unable to document details of the applicant's passport. You should not duplicate the information already documented in Section B. You must document two separate pieces of evidence.**

#### Document used to verify the client's address

All information recorded below must be taken from the most recent document available which should ideally be dated no more than 3 months from the date of the bond application.

#### Applicant 1

(please tick one box and complete the document details below):

- |   |   |
|---|---|
| <input type="checkbox"/> Utility bill   | <input type="checkbox"/> Tax assessment document                        |
| <input type="checkbox"/> Rates bill   | <input type="checkbox"/> Current driving licence                        |
| <input type="checkbox"/> Bank statement   | <input type="checkbox"/> Extract from the local telephone directory     |
| <input type="checkbox"/> Bank credit card statement   | <input type="checkbox"/> Extract from the official register of electors |
| <input type="checkbox"/> Mortgage statement   | <input type="checkbox"/> Council Tax Bill                               |
| <input type="checkbox"/> A state pension, benefit book or other government produced document showing benefit entitlement (Please state which document was used) | <input type="text"/>  |

#### Document details

Issuing bank/authority/company	<input type="text"/>
Account number/reference number	<input type="text"/>
Place of issue (country/town)	<input type="text"/>
Date on document (dd/mm/yyyy)	<input type="text"/>

#### Applicant 2

(please tick one box and complete the document details below):

- |   |   |
|---|---|
| <input type="checkbox"/> Utility bill   | <input type="checkbox"/> Tax assessment document                        |
| <input type="checkbox"/> Rates bill   | <input type="checkbox"/> Current driving licence                        |
| <input type="checkbox"/> Bank statement   | <input type="checkbox"/> Extract from the local telephone directory     |
| <input type="checkbox"/> Bank credit card statement   | <input type="checkbox"/> Extract from the official register of electors |
| <input type="checkbox"/> Mortgage statement   | <input type="checkbox"/> Council Tax Bill                               |
| <input type="checkbox"/> A state pension, benefit book or other government produced document showing benefit entitlement (Please state which document was used) | <input type="text"/>  |

#### Document details

Issuing bank/authority/company	<input type="text"/>
Account number/reference number	<input type="text"/>
Place of issue (country/town)	<input type="text"/>
Date on document (dd/mm/yyyy)	<input type="text"/>

## 4. Trust applicants (e.g. Trustees of the ABC Trust)

Copy of a dated Trust Deed and/or any deeds of variation

Date on Trust Deed (dd/mm/yyyy)

Trust name

Number of trustees

**All trustees must be verified as individual applicants (see section 3).**

Please confirm that all trustees have been verified as above (please tick as appropriate) Yes  No

Please provide names, addresses and dates of birth for Settlor and Protector of the Trust and all the Beneficiaries.

### Settlor of trust

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Protector of trust

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Beneficiary 1

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Beneficiary 2

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Beneficiary 3

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Beneficiary 4

Full name

Date of birth (dd/mm/yyyy)

Residential address

## 5. Corporate Trustees (e.g. ABC Trust Company Ltd as Trustees of the XYZ Trust)

Copy of a dated Trust Deed and/or any deeds of variation

Date on Trust Deed (dd/mm/yyyy)

Trust name

Number of trustees

List of directors for the Trust company obtained? (please tick as appropriate) Yes  No

List of authorised signatures (please provide a certified true copy of this document to RL360°)

Please confirm that two directors have been verified as in section 3 (at least one must be an executive director). Yes  No

Certificate of Incorporation Number

Date of incorporation (dd/mm/yyyy)

Copies of annual accounts and reports (if available) Date on accounts (dd/mm/yyyy)

Please provide names, addresses and dates of birth for Settlor and Protector of the Trust and all the Beneficiaries.

### Settlor of trust

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Protector of trust

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Beneficiary 1

Full name

Date of birth (dd/mm/yyyy)

Residential address

### Beneficiary 2

Full name

Date of birth (dd/mm/yyyy)

Residential address

5. Corporate Trustees (e.g. ABC Trust Company Ltd as Trustees of the XYZ Trust) continued

**Beneficiary 3**

Full name

Date of birth (dd/mm/yyyy)

Residential address

**Beneficiary 4**

Full name

Date of birth (dd/mm/yyyy)

Residential address

Evidence of the registered address (please tick as appropriate). Yes  No

6. Corporate applicants (e.g. ABC Limited)

Company name

List of directors for the company obtained? (please tick as appropriate). Yes  No

List of authorised signatures (please provide a certified true copy of this document to RL360°)

Please confirm that two directors have been verified as in section 3 (at least one must be an executive director). Yes  No

UK Companies House Company Number

Copies of annual accounts and reports (if available) Date on accounts (dd/mm/yyyy)

For Private Limited Companies, please complete section 3 for all shareholders holding more than 20% of the issued share capital.

Please confirm that these classes have been verified as above (please tick as appropriate). Yes  No

Evidence of the registered address (please tick as appropriate). Yes  No

## Data Protection

Any data you provide to RL360° may be shared, if allowed by law, with other companies both inside and outside of the RL360° Group and to persons who act on your behalf. Data and information about you can be transferred outside of the Isle of Man and RL360° may be required to provide it to its regulator, its government or anyone else required by law.

RL360° will use your data and information to allow for the administration of your policy, prevent crime, prosecute criminals and for market research and statistics. RL360° will, at all times, make sure that your data and information is only used in ways that are allowed by law.

The Isle of Man Data Protection Act 2002 allows you, after paying a small fee, to receive a copy of the data and information RL360° holds about you.

For further information please write to: Data Protection Officer, RL360°, RL360 House, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

## Declaration

In completing the Novia Offshore Bond Introducer Certificate I confirm that I have seen appropriate evidence of the applicant(s) identity and residential address as set out herein. Further, I agree to retain that evidence of for a minimum period of five years after the termination of the relationship between RL360 Insurance Company Limited and the applicant, and to make such records available to RL360 Insurance Company Limited immediately on request.

Signed

Date (dd/mm/yyyy)

Full name of signatory  
(in block capitals)

Position held within the  
company

Company stamp