Trustee/Settlement profile form

IMPORTANT: ALL SECTIONS MUST BE COMPLETED

|  |
| --- |
| **Name of trust:** |
|  |
|  |

|  |  |  |
| --- | --- | --- |
| **Date trust established *(****dd/mm/yyyy)***:** |  | **Jurisdiction of trust:** |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Type of trust:** |  | **Any identifying number** *(e.g. charity)***:** |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Name of trustee(s)\*\*\*:** |
|  |
|  |

|  |
| --- |
| **Correspondence address of trustee:** |
|  |
|  |

|  |
| --- |
| **Name of trustee's regulator** *(if applicable)***:** |
|  |
|  |

|  |
| --- |
| **Legislation under which the Trust/Settlement is formed:** |
|  |
| **Contact details for trustee** *(telephone number and email address)***:** |
|  |
|  |

|  |
| --- |
| **Settlor(**s) (any person who directly/indirectly provides Trust property): |
|  |
|  |

|  |
| --- |
| **Protector/enforcer** *(if applicable)***:** |
|  |
|  |

|  |
| --- |
| **Name of regulator of protector/enforcer** *(if applicable)***:** |
|  |
|  |

|  |
| --- |
| **Name of trust:** |
|  |
|  |

|  |  |  |
| --- | --- | --- |
| **Date trust established *(****dd/mm/yyyy)***:** |  | **Jurisdiction of trust:** |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Type of trust:** |  | **Any identifying number** *(e.g. charity)***:** |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Name of trustee(s)\*\*\*:** |
|  |
|  |

|  |
| --- |
| **Correspondence address of trustee:** |
|  |
|  |

|  |
| --- |
| **Name of trustee's regulator** *(if applicable)***:** |
|  |
|  |

|  |
| --- |
| **Legislation under which the Trust/Settlement is formed:** |
|  |
| **Contact details for trustee** *(telephone number and email address)***:** |
|  |
|  |

|  |
| --- |
| **Settlor(**s) (any person who directly/indirectly provides Trust property): |
|  |
|  |

|  |
| --- |
| **Protector/enforcer** *(if applicable)***:** |
|  |
|  |

|  |
| --- |
| **Name of regulator of protector/enforcer** *(if applicable)***:** |
|  |
|  |

# VERIFICATION DOCUMENTS

Please note: the documents listed below are required by Bedell Cristin to verify your identity in accordance with local laws and regulations. Bedell Cristin may need to request further information or documentation it considers necessary to fully understand any relationship or transaction.

**Please tick beside each required document to confirm that you have attached a copy:**

a certified\* copy of trust deed

a certified\* copy of any supplemental deeds

a profile form (as appropriate) for each settlor/provider of funds

a profile form (as appropriate) for the trustee(s)

a profile form (as appropriate) for any protector/enforcer

a profile form (as appropriate) for each beneficiary and persons known to be likely to benefit in line with legislation in the  
 applicable jurisdiction. Please refer to your Bedell Cristin contact if you have any questions in this regard.

**Completed by:**

|  |  |
| --- | --- |
| **Signature:** |  |
|  |  |
| **Name** *(please print)***:** |  |
|  |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Professional capacity:** |  |
|  |  |
| **Organisation:** |  |
|  |  |
| **Address:** |  |
|  |  |
| **Telephone number:** |  |

*Bedell Cristin is an organisation of separate legal practices and entities comprising of partnership and corporate form, each established to provide legal and/or professional services under the Bedell Cristin name from the various locations in which it is based.*

## \*CERTIFICATION

**When providing any copy documents these must be certified by a third party who is subject to professional rules of conduct. Suitable certifiers include:**

* a lawyer, notary public, actuary or accountant who is a member of a relevant professional body
* a member of the judiciary or a senior civil servant
* a serving police or customs officer
* an officer of an embassy, consulate or high commission of the country or territory of issue of documentary evidence of identity
* a director, officer or manager of a regulated financial services business in an equivalent\*\* jurisdiction.

**The required wording for the certification is as follows:**

**Please ensure this wording is replicated onto the photocopy that is certified.**

|  |
| --- |
| "I certify that I have seen the original document and that this extract of that document is an accurate copy.  [Signature of certifier]  [Name in block capitals]  [Professional capacity]  [Organisation]  [Address]  [Telephone number]  [Date]" |

# \*\* EQUIVALENT JURISDICTIONS

Please see links below to the relevant jurisdiction equivalent jurisdictions list:

[GFSC Handbook - Appendix C](https://www.gfsc.gg/sites/default/files/20190613%20-%20Handbook.pdf)

[JFSC Handbook - Appendix B](https://www.jerseyfsc.org/pdf/Part-1-Appendix-B-20150101.pdf)

[BVI AML Code of practice - Schedule 2](https://www.bvifsc.vg/sites/default/files/anti-money_laundering_and_terrorist_financing_code_of_practice_consolidated_15th_august_2018_.pdf)

[Cayman Islands list of equivalent jurisdictions](https://www.cima.ky/list-of-equivalent-jurisdictions)

Please note that these lists are subject to change. If you are unsure if the jurisdiction in question is classified as equivalently regulated please request confirmation from your Bedell Cristin contact.

# \*\*\*ULTIMATE EFFECTIVE CONTROL

Where the trustee is a legal person and that legal person is not a regulated trustee service provider in an equivalent jurisdiction we are required to identify those individuals that exercise ultimate effective control of over the company. In this regard would you please provide an individual profile form for any individual(s) exercising ultimate effective control over the company. Ultimate effective control can be identified as follows:

The individual(s) who ultimately controls the legal person through ownership; or, if no such person exists or can be identified;

The individual(s) who ultimately controls the legal person through other means; or, if no such person exists or can be identified;

The individual(s) who holds the position of a senior managing official of the legal person.

For lower risk relationships, a general threshold of 25% (10% for BVI and Cayman) is considered to indicate a material controlling ownership interest in capital. However, where the distribution of interests is uneven the percentage where effective control may be exercised (a material interest) may be less than 25% when the distribution of other interests is taken into account, i.e. interests of less than 25% may be material interests. Bedell Cristin may need to request further information or documentation in this regard if any higher risk factors are identified.