

ADDITIONAL INTERMEDIARY DECLARATIONS

To be accomplished by Intermediary if any of the following clients: **Proposed Insured, Applicant Owner, Beneficial Owner or Beneficiary/ies** named in the above mentioned application is classified as a **High Risk Client (HRC)**. The objective is to check the financial capacity and fund sources of an HRC.

Name of Client	Client Role (PI, AO, BO or Bene)
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Reason why client is considered as an HRC:		
Name of HRC:	Reason:	Relationship to Client:

Enhanced Due Diligence Conduct	Submit the document where the information was validated from
1. Verify the source of wealth of the client. "Source of Wealth" refers to the resource from which the customer's wealth, including all monetary instruments and properties, came, comes, or will come from, such as employment, business, investment, foreign remittance, inheritance, donation, and winnings.	<input type="checkbox"/> Latest Bank Certificate <input type="checkbox"/> Latest Pay Slip (1 month) <input type="checkbox"/> Latest Passbook <input type="checkbox"/> Latest Income Tax Return <input type="checkbox"/> Deed of Sale of Property <input type="checkbox"/> Others: _____
2. Other assets owned by the client.	<input type="checkbox"/> House (Net worth in Php _____) <input type="checkbox"/> Business (Net worth in Php _____) <input type="checkbox"/> Real Estate (Net worth in Php _____) <input type="checkbox"/> Others: _____
3. Verify the source of fund. "Source of Fund" refers to the origin of the funds that is the subject of the transaction, such as cash on hand, safety deposit box, and a particular bank or investment account.	<input type="checkbox"/> Salary/wages <input type="checkbox"/> Business <input type="checkbox"/> Gifts/Inheritance <input type="checkbox"/> Legal Claims <input type="checkbox"/> Investment Income <input type="checkbox"/> Others: _____
4. What is the nature of occupation and/or business of client?	<input type="checkbox"/> Banking <input type="checkbox"/> Manufacturing <input type="checkbox"/> Information Technology <input type="checkbox"/> Pawnshop or Jewelry Trader <input type="checkbox"/> Casino <input type="checkbox"/> Government Service <input type="checkbox"/> Others: _____
5. What is the reason for the transaction? (If purchasing a new policy, what is the purpose of the policy)	<input type="checkbox"/> Security <input type="checkbox"/> Protection <input type="checkbox"/> Health <input type="checkbox"/> Education <input type="checkbox"/> Retirement <input type="checkbox"/> Estate Planning <input type="checkbox"/> Others: _____
6. Confirm date of birth from an official document.	<input type="checkbox"/> Passport <input type="checkbox"/> NSO Birth Certificate <input type="checkbox"/> Marriage Contract <input type="checkbox"/> Others: _____
7. Verify permanent address through evaluation of proof of billing (utility bills/credit card statement etc.) or do an ocular visit/on-site visitation.	<input type="checkbox"/> Utility Bills <input type="checkbox"/> Credit Card Statement <input type="checkbox"/> On-site visit <input type="checkbox"/> Others: _____
8. If the client is involved in any litigation case, kindly request client to submit a written statement pertaining to the status of the case together with the pertinent court document/s.	<input type="checkbox"/> Court Decision <input type="checkbox"/> Court Resolution <input type="checkbox"/> Court Affidavit <input type="checkbox"/> Others: _____

I certify that I am authorized to complete this document and that, to the best of my knowledge provided herein are current and accurate and that I have conducted face-to-face contact with the client and beneficial owner.

Conducted By: _____
Signature over Printed name of Intermediary

Date: _____

*Enhanced Due Diligence (EDD) implemented starting _____