# **Example request for information template KYC (COP 12)**

Dear [recipient’s name]

I am writing to inform you that as a member of Responsible Jewellery Council (RJC), [company name] is required to implement Know Your Counterparty (KYC) procedures. These procedures involve identifying and keeping records on the essential facts of every company that we deal with as well as identify each person who has authority to act on its behalf. This is important to ensure:

* we prevent money laundering or the financing of terrorism (knowingly or unknowingly) in our industry
* we comply with the law
* we protect our business.

To fulfil our obligations, we ask that you assist us by responding to the attached form with questions we ask about your company.

Achieving certification against the RJC COP is very important to us because it is a statement of our credibility and evidence of our commitment to responsible business practices in the jewellery supply chain.

We thank you for your understanding and anticipated cooperation.

Kind regards,

## **Know Your Counterparty (KYC) form (COP12)**

***[Please note:*** *Before sending each form, check for publicly available information for incorporation documents (from commerce registry, website, stock exchange of the company is listed, etc.), and require the information only if it is not publicly available.*

*Members only need to seek the beneficial owner’s identification:*

* *if the counterparty is considered high-risk (for example, because you spot unusual transactions or find that the counterparty operates in a FATF high-risk jurisdiction)*
* *if required by law. In this case, check if there are any exemptions for listed companies first.*

*You may choose to combine your KYC form with your supply chain information requests for COP7 on Due Diligence.]*

**Counterparty Details**

|  |  |
| --- | --- |
| **Name****Company or individual** |  |
| **Registered address** |  |
| **Business address** |  |
| **Type of company eg Trader, refiner, bank, manufacturer, miner** |  |
| **Description of core business activity**  |  |
| **How many direct & indirect subsidiaries do you have?** Please provide a group chart if relevant |  |
| **Main markets** |  |
| **Main products** |  |
| **Phone number** |  |
| **Website** |  |
| **Please send copies of government-issued documents to support the above.****For individuals, please submit personal identity documents.****For companies, please submit business licences, company registration or tax ID number evidence.** |

**Legality of Business**

|  |  |
| --- | --- |
| **Date of incorporation** *(Or date of birth if individual)* |  |
| **Country of incorporation** *(or Nationality if individual)* |  |
| **VAT-number, Tax Identification or official Company Registration Number** |  |
| **Name(s) of official representative(s)** |  |
| **Names of the Board of Directors** |  |
| **Does the company hold a licence to conduct business(es)?** *If so, please provide a copy(ies)* |  |
| **Is any member of senior management a politically exposed person (PEP)?***If so, please give details* |  |

**Beneficial Owners (1)**

***If required***

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Country of incorporation** *(Or Nationality if individual)* |  |
| **Date of incorporation** *(Or date of birth if individual)* |  |
| **Percentage holding (%)** |  |
| **Please send copies of government-issued documents.** **For individuals, please submit personal identity documents.** **For companies, please submit business licences, company registration or tax ID number evidence.** |

**Beneficial Owners (2)**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Country of incorporation** *(Or Nationality if individual)* |  |
| **Date of incorporation** *(Or date of birth if individual)* |  |
| **Percentage holding (%)** |  |
| **Please send copies of government-issued documents.** **For individuals, please submit personal identity documents.** **For companies, please submit business licences, company registration or tax ID number evidence.** |

**Beneficial Owners (3)**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Country of incorporation** *(Or Nationality if individual)* |  |
| **Date of incorporation** *(Or date of birth if individual)* |  |
| **Percentage holding (%)** |  |
| **Please send copies of government-issued documents.** **For individuals, please submit personal identity documents.** **For companies, please submit business licences, company registration or tax ID number evidence.** |

**Anti-Money Laundering**

|  |  |
| --- | --- |
| **Is your company subject to Anti-Money Laundering/Combating financial terrorism Law/Regulation?***If yes, please give details of the regulation and regulator* | Yes:No: |
| **What payment method do you usually use to pay suppliers?** *Please state the (approximate) percentage (%) for each* | Bank transfers: % Cheques/checks: %Cash: % |
| **Do you have any KYC policies or procedures?***If so, please include copies*  |  |
| **Do you monitor unusual and potentially suspicious activity of your counterparties?***If so, please give details* |  |
| **Do you have a procedure to prevent, detect and report suspicious transactions from your counterparties to the relevant authority?***If so, please give details* |  |
| **Do you have policies covering relationships with politically exposed persons (PEP’s), their family and close associates?***If so, please give details* |  |
| **Do you have a maximum amount allowed for cash payments?** *If yes, how much is it?* |  |

**Additional Information**

|  |  |
| --- | --- |
| **Space for additional information** |  |

Signed:

Print name:

Job title:

Date: