

SMALL FIRMS SERVICES LIMITED Client Registration Form

Please use **BLOCK** letters. Where a full name is required give all forenames. Please complete all sections in full. Failure to complete required boxes may result in delay or cancellation of services.

1. Company Name and/or trading name
2. Business trading address (if any)
3. Registered Office Address (Limited Company)
4. Company Telephone No:
5. Nature / type of business
6. Website address and/or email address

SECTION TWO – Business/Company appointed representative completing this form

1. **Note: An accommodation address or PO Box is not permitted here and must be the same name and address shown in the identity documents provided.**
- Full Name:
- Position:
- Address:
- Postcode: Date of Birth
- Tel. no. (home) Tel. no.(work)
- email:

Please list all owners/partners/directors other than the representative listed above

| FULL NAME & POSITION OR TITLE (BLOCK LETTERS) | DATE OF BIRTH | ADDRESS |
|--|--------------------|---------|
| i. | / / | |
| ii. | / / | |
| iii. | / / | |
| iv. | / / | |

SECTION THREE – MONEY LAUNDERING REGULATIONS 2007 AND M.A.I.L SCHEME

I understand that details of this agreement may be passed to law enforcement organisations if requested in accordance with the above regulations or scheme. By signing this form I agree to the terms and conditions detailed on the www.sfsqo.com website. I must also advise **SMALL FIRMS SERVICES LIMITED** of any changes to the above business or appointed representative.

Signed: Date:

SECTION FOUR - IDENTIFICATION DOCUMENTS REQUIRED (Copies only please)

Identification documents provided of the appointed representative above.

1. Passport, UK Photo Driving Licence or Identity Card
2. Very recent utility bill

In addition – if a limited company:

3. Company Registration Certificate
- Documents checked by: (office use only)