

New Client Sign Up Form – Directors and Companies

DATE:

Name		Business Description			
Incorporated		Trading commenced		A/C period end	
UTR	Tax District		PAYE Reference		PAYE District

Contact details				Main <input type="checkbox"/>	Contact for billing <input type="checkbox"/>
Surname		Title	Name		Initials
Salutations	Formal			Informal	
Director <input type="checkbox"/>	Partner <input type="checkbox"/>	Owner <input type="checkbox"/>	Of Client Id		
Date of Birth		Employer Reference		NI Number	
Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Married to client		Date (if known)
UTR			Tax District		

Main Address <input type="checkbox"/>			Billing Address – if different <input type="checkbox"/>		
Name/No			Name/No		
Street			Street		
Town			Town		
County		Postcode	County		Postcode
Telephone		Facsimile	Telephone		Facsimile
e-mail			e-mail		
Same as Client Id			Same as Client Id		

Bank Name									
Street									
Town									
County									
Postcode									
Telephone									
Sort code				-			-		
Account Number									

Previous Accountants details
Contact Name:
Name of firm:
Address:
Telephone number:

MONEY LAUNDERING CHECKLIST

Companies

Please attach a copy of your Certificate of Incorporation. For non-UK companies we require the copy to be certified by a lawyer or accountant.	
Please provide details of two principle shareholders or directors:	
1) Name	
1) Home address	
1) Position with company	
1) Date of birth	
2) Name	
2) Home address	
2) Position with corporate	
2) Date of birth	

For Each Directors: Please produce to us two of the following.

	Please Tick
Current signed passport	<input type="checkbox"/>
Current UK or EU photo card driving license	<input type="checkbox"/>
EU member state ID card	<input type="checkbox"/>
Utility bill, tax bill or bank statement (dated within the last 3 months)	<input type="checkbox"/>

Has a member of C CHARLES & CO LTD known you for at least 4 years? Yes/No
 If yes then which member and for how many years?

Please Sign and Date

Sign: _____

Please print your name: _____

Date: _____