Appendix № 4

QUESTIONNAIRE OF THE CLIENT – SOLE PROPRIETOR

(CLIENT'S REPRESENTATIVE)

Part I

|  |  |
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| Surname, first name, patronymic (if any) |  |
| Date of birth |  |
| Place of birth |  |
| Citizenship |  |
| Address of residence place (registration) |  |
| Address of the place of stay |  |
| Details of the identity document: series (if any) and number of the document, date of issue of the document, name of the issuing authority and subdivision code (if any) |  |
| Document confirming the right of a foreign citizen or stateless person to stay (residence) in the Russian Federation (migration card in the absence of other documents): series (if available) and number of the document, date of the beginning of the period of validity of the right to stay (residence), date of the end of the period of validity of the right to stay (residence) |  |
| Registration date (foundation) |  |
| Information on registration as a sole proprietor | Primary state registration number (OGRN) |  |
| Name of the registration authority |  |
| Place of state registration |
| Type of business activity (including goods produced, work performed, services rendered) |  |
| Information on the license for the right to carry out activities subject to licensing: type, number, date of issue of the license; by whom issued; validity period; list of licensed activities. |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Activities subject to licensing are not carried out |
| TIN number, SNILS (Insurance individual account number) (if available) |  |
| Indicate, if you are: | 1. a foreign public official |  |
| 2. an official of public international organizations |  |
| 3. a person holding (occupying) state positions of the Russian Federation, positions of members of the Board of Directors of the Central Bank of the Russian Federation, positions of federal public service, appointment to which and dismissal from which is carried out by the President of the Russian Federation or the Government of the Russian Federation, positions in the Central Bank of the Russian Federation, state corporations and other organizations established by the Russian Federation on the basis of federal laws, included in the lists of positions determined by the President of the Russian Federation or the Government of the Russian Federation |  |
| Indicate, if you are a spouse, close relative of: | 1. a foreign public official |  |
| 2. an official of public international organizations |  |
| 3. a person holding (occupying) state positions of the Russian Federation, positions of members of the Board of Directors of the Central Bank of the Russian Federation, positions of federal public service, appointment to which and dismissal from which is carried out by the President of the Russian Federation or the Government of the Russian Federation, positions in the Central Bank of the Russian Federation, state corporations and other organizations established by the Russian Federation on the basis of federal laws, included in the lists of positions determined by the President of the Russian Federation or the Government of the Russian Federation |  |
| Position of the client who is a person specified in subparagraph 1 of paragraph 1 of Article 7.3 of Federal Law No. 115-FZ dated August 7, 2001, name and address of his/her employer |  |
| Degree of kinship or status (spouse) of the client (in relation to the person specified in subparagraph 1 of paragraph 1 of Article 7.3 of Federal Law N 115-FZ dated August 7, 2001). |  |
| Indicate if you plan to perform banking operations and transactions for the benefit of other persons, in particular on the basis of agency agreement, commission agreement, assignment agreement, trust management agreement, make payments for third parties. |  Yes (in this case it is necessary to fill in the beneficiary questionnaire) No |
| Beneficial owner (an individual who has the ability to control your actions as a sole proprietor) |  |
| Information on the client's beneficial owner, including the credit organization's decision to recognize another individual as the client's beneficial owner with the justification of the decision (if such a beneficial owner is identified). |  |
| Information confirming the person's authorization to represent the client – name; issue date, expiration date, and number of the document on which the authorization of the client representative is based |  |
| Information on the purposes of establishing relations with the bank[[1]](#footnote-1) |  |
| What banking products/services do you intend to use: | Clearing settlements in rublesClearing settlements in foreign currencyCash deposits and withdrawalsOperations on purchase/sale of foreign currencyBrokerage operations on the securities marketDepository operationsOperations with promissory notes of JSC "Togliattikhimbank" Placing cash on depositObtaining loansTrust management of monetary funds and propertyOthers (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| The purpose of financial and economic activities | Planned number of operations per month:up to 50 over 50 |
| Planned cash turnover per month: up to 500 thsd rubles 500 thsd rubles to 1 mln rubles 1 mln rubles to 5 mln rubles over 5 mln rubles |
| Planned amount of cash withdrawal transactions per month:0 rubles up to 500 thsd rubles 500 thsd rubles to 1 mln rubles 1 mln rubles to 5 mln rubles over 5 mln rubles |
| Planned amount of operations related to money transfers within the framework of foreign trade activities per month:0 rubles up to 1 mln in ruble equivalent1 mln rubles to 5 mln rubles in ruble equivalent over 5 mln rubles in ruble equivalent |
| Contact information (phone number, fax number, e-mail address, postal address (if available) |  |
| Domain name, a website page on the Internet |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Services using the Internet are not provided |
| Information on sources of monetary fund’s origin (or) other assets |  |
| Date of сompletion of Questionnaire: |  |

Client’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

Part II (to be completed by the bank officer):

|  |  |
| --- | --- |
| Information (documents) on financial reputation: | Copy of annual financial statements (balance sheet, statement of financial results)Copy of the annual (or quarterly) tax returnCopy of the auditor's report on the annual report for the previous year, which confirms the reliability of the financial (accounting) statements and compliance of the accounting procedure with the legislation of the Russian FederationCertificate of fulfillment of the taxpayer's (levy payer, tax agent) obligation to pay taxes, levies, penalties, fines, issued by the tax authorityInformation on absence of insolvency (bankruptcy) proceedings in respect of the client, judicial decisions on declaring the client insolvent (bankrupt), liquidation procedures as of the date of submission of documents to the credit organization that have entered into forceData on the client's rating posted in the Internet on the websites of Russian credit rating agencies and international rating agencies ("Standard & Poor's", "Fitch-Ratings", "Moody's Investors Service" and others)  Non-resident's documents Financial reputation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Information on business reputation  |  |

The data has been entered into an electronic database:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

 (position) (signature) Full name

|  |  |
| --- | --- |
| Date of account opening |  |
| Surname, first name, patronymic, position of the person responsible for the decision to accept the client for service |  |

 Account is opened by:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

 (position) (signature) Full name

The results of verification of the presence (absence) in relation to the client of information about his involvement in extremist activities or terrorism, his connection with terrorist organizations and terrorists or proliferation of weapons of mass destruction:

|  |  |
| --- | --- |
| Verification date |  |
| Verification result |  |
| Number and date of the list of organizations and individuals in respect of which there is information about their involvement in extremist activities or terrorism, numbers (if any and dates) of lists of organizations and individuals associated with terrorist organizations and terrorists or proliferation of weapons of mass destruction, compiled by the UN Security Council or bodies specially created by decisions of the UN Security Council, containing information about the client, or number and date of the decision of the interagency coordination body carrying out the client's activities performing functions to counter terrorism financing, on freezing (blocking) of funds or other property of the client. |  |

|  |  |
| --- | --- |
| Risk level  |  |
| Justification of risk level assessment  |  |
| Retention period of the questionnaire |  |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

 (position) (signature) Full name

Date of updating the questionnaire «\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

 (position) (signature) Full name

Date of relationship termination with the client «\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

 (position) (signature) Full name

1. Information is established **once** at the time of admission to service and is updated when there are doubts about its accuracy [↑](#footnote-ref-1)