

CDD/KYC FORM FOR INDIVIDUALS

PERSONAL INFORMATION REQUIRED				
Full Name:				
Father/Husband Name:				
CNIC/Passport No:				
Country of Residence:				
Residential Address:				
Contact (No)s:				
Nationality:				
Date of Birth:				
Mode of Payment:	1. Bank Instrument 2. Online Remittance 3. Cash Deposit 4. Other			
Purpose of Investment/Purchase/Sale:				
Occupation:				
Source of Funds:	Salary		Foreign Remittance	
	Business		Other (Please Specify)	
Tax Filer Status				
Next of Kin:	Name:		Relationship:	
	CNIC/Passport No:		Contact #	
Signature & Date of Agreement:				

Note: In case of joint/Multiple ownership of property being purchased, please use the above form separately for each owner

BENEFICIAL OWNERSHIP (IF ANY) INFORMATION REQUIRED				
Full Name:				
CNIC/Passport No:				
Country of Residence:				
Nationality:				
Date of Birth:				
Relation with Investor:				
Purpose of Investment:				
Occupation:				
Source of Income:	Salary		Foreign Remittance	
	Business		Other (Please Specify)	
DETAILS OF REAL ESTATE CONSULTANT (if applicable)				
Name:				
CNIC/Passport No:				
Nationality:				
Address:				

I _____ s/o, D/o or W/o _____ holder of
CNIC / Passport No: _____ and R/o _____

_____ confirm that I have disclosed all information, that is correct and complete, and my source of income is legitimate and I am not associated/do not have any connection with any organization that has been declared an illegal organization by the Government of Pakistan or United Nations. Furthermore I undertakes that I have clearly read and understood the red flags set forth by FBR/DNFBP/FATF regarding the sale/purchase of the property and have not violated any of the red flags at any stage during sale/purchase of the said property and undertake that I will solely be responsible for any violation of any clause/red flags and I will face the any legal consequences arises due to any such violation at any stage. I further undertake that the above mentioned pay order is prepared from my own bank account.

Signature of Buyer:- _____

Name _____

Date: _____

OFFICE USE ONLY

Description	Remarks
Original Documents Reviewed: (Copies attached)	
Risk Status: High/ Medium / Low	
Customer Screening done by relying on: NACTA List & UNSC (very confidential)	
File checked by Assistant Concerned project	
File Re-checked by AD concerned project	
File endorsed by DD concerned project	
Approval of Director (Estate)	