



KNOW YOUR CUSTOMER

IDENTITY DETAILS

Title: Forenames: Surname:
Date of birth:/...../..... National ID/Passport No: Nationality:

ADDRESS AND CONTACT DETAILS

Postal Address:
.....

Physical Address:
.....

Village / Town / City: Country:

Duration of stay: if >2 years give previous Country of residence
.....

Telephone: Mobile: Email Address:

Employer: Place of work:

Occupation: Work telephone No:

BANKING DETAILS

Bank name: Branch: Account Number:

Account Name: Account Type:

Source of Funds:

State nature of business if funds received from sources
other than the salary:

ANTI- MONEY LAUNDERING AND COUNTER TERRORIST FINANCING REQUIREMENTS

In accordance with the Financial Intelligence Regulations, the following documents should be provided for verification:

Natural Persons

1. Identification document within 6 months' validity i.e. Certified Oman for citizens; Certified Passport including work and residence permit or exemption for foreign nationals; Certified Refugee Identity card for refugees
2. Proof of source of funds/income i.e. payslip (not older than 3 months); recent 3 months' bank statements, letter from employer (not older than 3 months).
3. Proof of residence i.e. utility bill (not older than 6 months); valid lease agreement (within lease period); letter from employer (not older than 3 months); letter from Tribal Authority; Affidavit from Commissioner of Oaths; Title Deed: Council rates receipt
4. Certified Birth Certificate for policies taken out under the name of a minor child.



Companies

- Certification of incorporation
- Memorandum and Articles of Association / Constitution
- Notice of Registered office and Postal Address
- Identification documents of the persons managing the company
- Resolution specifying who is authorized to act on behalf o company
- Identification documents) of the person(s) authorized to act on behalf of the company
- Shareholder certificate
- Tax clearance certificate
- Details of registered office and place or business

Partnerships

- Partnership agreement
- Identification documents of the natural persons who are partners
e.g. Certified copy of ID / Passport
- Resolution specifying who is authorized to act on behalf of the partnership
- Identification document(s) of the person(s) authorized to act on behalf of the partnership
- Tax clearance certificate

Trusts and Societies

- Certificate or Registration or other rounding documentation
- Copy of Constitution
- Identification documents for Office Bearers
- Identification documents) of the person(s) authorized to act on behalf of the society/ church/ club
- Details of Registered Office
- Copy of Resolution authorizing the transaction/ business relationship
- Nature of Business (Where applicable)

PROMINENT INFLUENTIAL PERSONS SELF DECLARATION

As Per the Financial Intelligence Act. Any Prominent Influential Person (PIP) must complete the below self-declaration.

Prominent Influential Persons (PIPs) means a person who is or has been entrusted with public functions within Botswana or by a foreign country, his or her close associates or immediate member of the family or an international organization.

Indicate by ticking Yes or No if you are a prominent influential person(PIP) or are politically exposed.

Yes No

If Yes, state the nature of your influence and/or exposure

.....

PIP IN YOUR IMMEDIATE FAMILY OR CLOSE ASSOCIATES

This includes all people that have been entrusted with prominent public function or an individual who is a close associate or immediate family member to that person.

Full names:.....

Address:.....

Title:.....

Relation:.....



PROTECTION OF PERSONAL DATA NOTICE

CLIENT INFORMATION SHARING CONSENT

Dikwata Insurance Agency will process and protect your personal information as required by relevant laws in the provision of services. Such processing may include personal identifiable information as well as financial and relevant health information. You have the right to ask us for a copy of your personal information and to update or correct.

We collect, process, record, collate, store, analyze, disclose and disseminate personal information for purposes:

- to conclude and administer your account or policies which may include underwriting
- collection of payments
- assessing and processing amendments and claims payout
- to comply with legal and regulatory requirements, including applicable prudential rules and codes of conduct in our industry
- to protect Dikwata Insurance Agency interests and
- any purpose related to the above.

If you do not provide the requested information, Dikwata Insurance Agency cannot provide the requested services. By signature hereof, you give consent for sharing of your personal information with Dikwata Insurance Agency including its parent company Dikwata SACCOS and with other service providers where required, for any of the purposes listed above including law enforcement agencies.

CLIENT CONSENT DECLARATION

- I/We understand that Dikwata Insurance Agency may hold information gathered about me from all its policies and as such my rights under the DataProtection Act will not be affected
- I/We understand that all my personal information is treated as private and confidential by Dikwata Insurance Agency staff, independent contractors, agents and volunteers.
- I/We understand that personal information is held about me.
- I/We have had the opportunity to discuss the implications of sharing or not sharing information about me.
- I/We have the right to see any information that Dikwata Insurance Agency holds about me, and to have my details removed.
- I/We understand my/our right to privacy and the right to have my/our personal information processed in accordance with the conditions for the lawful processing or personal information.
- I/we consent to share my/our personal information voluntarily and understand that such consent may be withdrawn at any time
- I/We agree that personal information about me may be shared and gathered from the following Dikwata Insurance Agency policies.
 - a. Group Funeral Scheme
 - b. Motor and Non Motor
 - c. Credit Life Protection Plan

DECLARATION

I hereby declare that the detailed furnished above are true and correct for the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be liable for it.

Full name:

Signature:..... Date:..... Place: