

Customer Profile Form

(For Corporate Customers)



Guaranty Trust Bank Ltd

To be completed by the Relationship Manager

PART I: CUSTOMER'S DETAILS

| | | |
|------------------------|--|--|
| Account Name | | |
| Name of Signatory(ies) | | |
| Business Address | | |
| Name of Director | | |
| Name of Director | | |

PART II: CUSTOMER'S AML RISK CATEGORY

| | Score (1-3) |
|--|-------------|
| Presence | |
| Domicile/Citizenship | |
| Nature of business activities/occupation | |
| Length of relationship with the Bank | |
| Usage of Bank's products and services | |
| Total Weighted Average (WA) | |

| | Score <1.5 | Low | 1.6 < Score < 2.5 | Medium | Score >=2.5 | High |
|---------------------------------------|------------|-----|-------------------|--------|-------------|------|
| Customer Category Code | 1 | | 2.5 | | 3 | |
| Justification of customer risk rating | | | | | | |
| | | | | | | |
| | | | | | | |

PART III: RELATIONSHIP MANAGER'S DECLARATION

As the account officer for the above named prospective customer(s) of the bank, I hereby certify that I have carried out the relevant due diligence to establish the identity, address and nature of business of the company and its eligibility as an account holder with the bank. On the basis of information arising from my discussions with the prospective customer and due diligence, I confirm that my AML risk rating of the prospective customer is appropriate and in line with the bank's guidelines.

I acknowledge that it shall be my responsibility to continuously monitor the account holder(s)/the account activity and to promptly inform Compliance Office, if at any point in time, there is (are) profound change(s) in the standing of the account holder(s) and/or suspicious transaction on the account.

| | | | |
|-----------------------------|--|------------|--|
| Relationship Manager's Name | | Employ. No | |
| Signature | | Date | |

PART IV

| | | | |
|---|--|----------------|--|
| Head of Operations' Concurrence: I concur to the AML risk (in PART III of this form) of the customer by the Relationship officer. | | | |
| Head of Operations' Name | | Employment No. | |
| Signature | | Date | |

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