**AML KYC Review Checklist**

**Document Key:**

* // - Notes about the item. This text will not be displayed on the checklist.
* Underline – values that will not result in a validation message
* Nested review items are dependent on the review item they are nested under. For example:

Is client a Politically Exposed Person (PEP)? *|| (Blank/Yes/No)*

* + If yes

Is PEP Identification form completed and approved and on file? *|| (Blank/Yes/No)*

For the above question “Is client a Politically Exposed Person (PEP)?” if the user selects “Yes” then they will need to answer the follow up question “Is PEP Identification form completed and approved and on file?”

**Personal Customer Review Checklist**

**Know Your Customer (KYC) Information**

* Reason for Review
  + *If Other*
    - Reason for review details
* Is current proof of ID on file? *|| (Blank/Yes/No)*
* Is proof of ID certified? *|| (Blank/Yes/No/NA)* 
  + *If No or Na*
    - Rationale why proof of ID is not certified.
* Is second identification on file where applicable? *|| (Blank/Yes/No/NA)* 
  + *If No or NA*
    - Rationale why second identification is not on file
* Is passport identification on file where applicable? *|| (Blank/Yes/No/NA)* 
  + *If No or NA*
    - Rationale why passport identification is not on file or not applicable
* Is Country of Birth/Nationality on file? *|| (Blank/Yes/No)*
* Is Country of Citizenship captured? *|| (Blank/Yes/No)* (can be on file or in source system)
* Are two character references on file where applicable? *|| (Blank/Yes/No/NA) Jamaica Only* 
  + *If No or NA*
    - Rationale why two character references are not on file
* Is proof of residential address on file? *|| (Blank/Yes/No/NA)*
  + *If No or NA*
    - Rationale why proof of residential address is not on file
* Is client a Non-Resident? *|| (Blank/Yes/No)*
  + *If Yes*

Is Bankers Reference/Bank Statements on File? *|| (Blank/Yes/No)*

* Is client a Politically Exposed Person (PEP)? *|| (Blank/Yes/No)*
  + If yes

Is PEP Identification form completed and approved and on file? *|| (Blank/Yes/No)*

* Was a new Sanctioned Database Check Performed (The result to be placed on file)? *|| (Blank/Yes/No)*
* Sanction Database Type One // *Required*
* Sanctioned Database Type One Date Performed // *Required*
* Sanction Database Type Two
* Sanctioned Database Type Two Date Performed
* Was new Basic Internet Search (E.G. Google Search) performed (The result to be placed on file)? *|| (Blank/Yes/No)*
* Any change to employment details? *|| (Blank/Yes/No)*
  + *If Yes*

Provide Employment Details

Is Proof of employment on file where applicable *|| (Blank/Yes/No/NA)*

If Yes or NA

Rationale why Proof of employment is not on file

**Section: High Risk**

* Select ICBS Customer Classification
  + *If Customer Classification is not default*
    - Was the required Enhance Due Diligence activities performed as required by Compliance? *|| (Blank/Yes/No)*
    - Select High Risk Matrix Category 1 *||* *required if Customer Classification is not default*
    - Select High Risk Matrix Category 2
    - High Risk Relations Commentary
* Is Customer Classification Code correct in ICBS?*|| (Blank/Yes/No/NA)*
  + *If Yes or No*
    - Rationale why Customer Classification Code is not correct in ICBS

**Section: FATCA/CRS**

* Is Individual Self Certification Form on file? *|| (Blank/Yes/No)*
  + *If No*
    - Rationale why Individual Self Certification Form is not on file
* Is Country of Tax residency on file? *|| (Blank/Yes/No)* 
  + *If No*
    - Rationale why Country of Tax residency on file
* Is Tax ID number on File? *|| (Blank/Yes/No/NA)*
  + *If No*
    - Rationale why Tax ID number is not on file

**Section: Risk Rating**

* + - Calculated Risk Rating *|| (Required)*
    - Recommended Risk Rating *|| (Required)*
    - Rationale for recommended Risk Rating *|| (Required)*
    - Approved Risk Rating *|| (Required) Entered By Manager*
    - Rationale for approved Risk Rating *|| (Required) Entered By Manager*

**Section: Approvals**

* + - * Is file KYC Compliant? (*Blank/Yes/No) If No is selected then the reviewer will not receive validation messages and will still be able to send the review to the manager. The manager will not be able to set the Approved Compliance Status to Compliant.*
        + *If No*

KYC Details

* + - * Approved Compliance Status. *|| (Blank/Complaint//Non-Compliant) Entered By Manager*

**Section: Maintenance**

* Maintenance performed ?*|| (Blank/Yes/No)*

**Section: Comments**

**Non-Personal Customer Review Checklist**

**Know Your Customer (KYC) Information**

* Reason for Review
  + *If Other*
    - Reason for review details
* Any changes to the type of Business? *|| (Blank/Yes/No)*
  + *If Yes*
    - *D*etails of business operation
* Is Application form deemed current? *|| (Blank/Yes/No)* 
  + *If No*
    - Has application form been updated and on file? *||* *(Blank/Yes/No)*
* Are the required number of valid Ids held (refer country specific guidelines)? *(Blank/Yes/No)*
* Is valid address on file (refer to country guideline)? *|| (Blank/Yes/No)*
* Is Beneficial Ownership confirmed and on file? *|| (Blank/Yes/No/NA)*
  + *If No*
    - Rationale why Beneficial Ownership not on file
* Were there any RERs or UARs within last 12 months? (Blank/Yes/No/Unknown)
* Are all Directors/Beneficial Owners/Principal Officers/Power of Attorney compliant? *|| (Blank/Yes/No)*
* Was a new Sanctioned Database Check Performed (The result to be placed on file)? *|| (Blank/Yes/No)*
* Sanction Database Type One // *Required*
* Sanctioned Database Type One Date Performed // *Required*
* Sanction Database Type Two
* Sanctioned Database Type Two Date Performed
* Was new Basic Internet Search (E.G. Google Search) performed (The result to be placed on file)? *|| (Blank/Yes/No)*

**Section: Suppliers**

* Any changes to Primary Clients / Suppliers? *|| (Blank/Yes/No) (Required)* 
  + - * *If Yes*
        + List Primary Clients / Suppliers
        + Select country(s) where business activity is conducted
        + Are suppliers operating in Sanctioned/Restricted or high-risk jurisdictions?

**Section: Source of Wealth**

* Any changes to Source of Wealth? *|| (Blank/Yes/No)* 
  1. *If Yes*
     + Source of Wealth on file *|| (Yes/No)*
     + Source of Wealth Details

**Section: Documents**

* Are all other business registration documents on file? *|| (Blank/Yes/No)*
  + *If No*
    - Rationale why all business registration documents are not on file *|| textbox*
* Are all business related annual renewals on file? *|| (Blank/Yes/No)*
  + *If No*
    - Rationale why all business related annual renewals are not on file *|| textbox*
* Certified Copy of Incorporation *|| (Blank/Yes/No/NA)*
* By-Laws *|| (Blank/Yes/No/NA)*
* Notice of Directors *|| (Blank/Yes/No/NA)*
* Notice of Secretary *|| (Blank/Yes/No/NA)*
* Certificate of Good Standing*|| (Blank/Yes/No/NA)*
* Memorandum & Articles of Association *|| (Blank/Yes/No/NA)*
* Certified copy of Register of Directors & Officers *|| (Blank/Yes/No/NA)*
* Partnership Operation Agreement *|| (Blank/Yes/No/NA)*
* Group Corporate Structure *|| (Blank/Yes/No/NA)*
* Tax Clearance Certificate *|| (Blank/Yes/No/NA)*

**Section: High Risk**

* Select ICBS Customer Classification
  + *If Customer Classification is not the value default*
    - Was the required Enhance Due Diligence activities performed as required by Compliance? *|| (Blank/Yes/No)*
    - Select High Risk Matrix Category 1 *||* *required if Customer Classification is not default*
    - Select High Risk Matrix Category 2
    - High Risk Relations Commentary
* Is Customer Classification Code correct in ICBS?*|| (Blank/Yes/No/NA)*
  + *If Yes or No*
    - Rationale why Customer Classification Code is not correct in ICBS
* Was a site visit performed at Primary business location (*not expected for international clients*)? *|| (Blank/Yes/No/NA) || Customer Classification is not Default* 
  + *If No or NA*
    - Rationale why a site visit to Primary business location was not performed
* Site visit of primary business location details

**Section: FATCA/CRS**

* Is Entity OR Individual Self Certification Form on file (whichever is applicable)*|| (Blank/Yes/No)* 
  + *If Yes*
    - Rationale why Entity OR Individual Self Certification Form on file (whichever is applicable)
* Is Country of Tax residency on file? *|| (Blank/Yes/No)*
  + *If Yes*
    - Rationale why Country of Tax residency not on file?
* Is Tax ID number on File? *|| (Blank/Yes/No/NA)*
  + *If No*
    - Rationale why Tax ID number is not on file
* Is controlling persons Self Certification Form on file for Passive Entity? *|| (Blank/Yes/No)*
  + *If No*
    - Rationale why controlling persons Self Certification Form not on file for Passive Entity?

**Section: Risk Rating**

* Is AML/ATF Client Risk Rating (CRR) Tool completed and on file? *|| (Blank/Yes/No)*
* Calculated Risk Rating *|| (Required)*
* Recommended Risk Rating *|| (Required)*
* Rationale for recommended Risk Rating *|| (Required)*
* Approved Risk Rating *|| (Required) Entered By Manager*
* Rationale for approved Risk Rating *|| (Required) Entered By Manager*

**Section: Approvals**

* + - * Is file KYC Compliant? (*Blank/Yes/No) If No is selected then the reviewer will not receive validation messages and will still be able to send the review to the manager. The manager will not be able to set the Approved Compliance Status to Compliant.*
        + *If No*

KYC Details

* + - * Approved Compliance Status. *|| (Blank/Complaint/Non-Compliant) Entered By Manager*

**Section: Maintenance**

* Maintenance performed ?*|| (Blank/Yes/No)*
* Is ‘Customer Classification’ field populated (mandatory for High Risk Customers)? *|| (Blank/Yes/No)*
* Is customer’s ‘Potential Activity’ captured in ICBS and updated as required? *|| (Blank/Yes/No)*
* Is TPP category populated (mandatory if third party classification selected)? *|| (Blank/Yes/No/NA)*
* Are citizenship fields and country codes updated? *|| (Blank/Yes/No)*
* Are CIF relationships linked? *|| (Blank/Yes/No)*
* Is foreign tax compliance or CRS data updated? *|| (Blank/Yes/No)*
* Are AML Risk Rating, AML Review Date, KYC code and KYC date updated? (Blank*/Yes/No*)
* Commentary

**Section: Comments**

**Account Review Checklist**

**Section: General**

* + - * Will this account be used by or on behalf of a third party? *|| (Blank/Yes/No)*

**Section: Transaction Profile**

* Account Activity Reviewed against stated potential activity? (the last 6 months) *|| (Blank/Yes/No)*
* Is Account Activity consistent with stated potential activity? *|| (Blank/Yes/No)*
  + *If NO* 
    - Was there any changes to the size/pattern/business activity type/the source of funds/employment of the individual. This should be supported by the results of the review of financial information/site visit (where applicable). Include in the comments any knowledge of Unusual Activity Reports being filed on the customer or any remedial action taken by the business.
* Number of debits per month *|| (Range TextBox) (not required to send to approver)*
* Total value of debits per month *|| (Range TextBox) (not required to send to approver)*
* Number of credits per month *|| (Range TextBox) (not required to send to approver)*
* Total value of credits per month *|| (Range TextBox) (not required to send to approver)*
* Profile Commentary *(not required to send to approver)*

**Section: Source of Funds**

* Any changes to the source of funds? *|| (Blank/Yes/No)* 
  + - *If Yes*
      * Source of Funds Details. *|| (TextBox)*
      * Is Proof of Source of funds on file? *|| (Blank/Yes/No)*
        + *If No*

Rationale why proof of source of funds not on file

**Section: Purpose of Account**

* Any changes to the purpose of the account? *|| (Yes/No) (Required)*
  + *If Yes*
    - Provide purpose details *|| (Textbox)*

**Section: Comments**