

## CLIENT INFORMATION SHEET (CORPORATE)

Business Name: \_\_\_\_\_

\_\_\_\_\_ Telephone Nos: \_\_\_\_\_

Principal Business Address: \_\_\_\_\_

\_\_\_\_\_

Nature of Business: \_\_\_\_\_ TIN No: \_\_\_\_\_

List of Directors/Partners: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List of Principal Stockholders owning at least 2% of the capital stock:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Beneficial owners, if any:

\_\_\_\_\_

Position: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Form completed by: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_

Policy No: \_\_\_\_\_

***(Please attach copy of Articles of Incorporation/Partnership and By-Laws)***

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