

We were unable to trace your organisation's Ultimate Beneficial Owner (UBO). That is why you are receiving this form. We would be grateful if you could fill it in and return it to us.

Before we can issue insurance or authorise a payment to a third party, according to various legislative measures and regulations, including the sanctions laws, we are required to perform a screening. That screening involves identifying the person who is ultimately the owner of the entity or ultimately entitled to receive compensation in the event of damage or loss (the Ultimate Beneficial Owner or UBO). Your organisation may have one or more UBOs. On the UBO form you will need to indicate who your UBOs are. More information about this is available on www.tvm.be/nl/sanctieregelgeving. Use the questionnaire on www.tvm.be/nl/sanctieregelgeving/ultimate-beneficial-owners to determine who the UBOs are for your organisation.

TERMINOLOGY

Explanation of terminology in this document:

- **Interest:** ownership or effective control of a capital interest (for example, share certificates or depository receipts for shares), voting rights in general meetings of shareholders, interest as a beneficiary of assets, special control of assets, right to a share in communal property, right to a share in the profit, voting rights in decision making on amendments to a partnership firm agreement, or voting rights in decision making on important factors in the implementation of a partnership agreement.
- **Organisation:** a legal person, partnership firm and/or trust, or a comparable entity established under foreign or European law.
- **Ultimate Beneficial Owner (UBO):** any natural person who, either directly or indirectly, has an interest of 25% or more in (the assets of) the organisation.
- **Pseudo-UBO:** if it is not possible to establish a natural person as a UBO, the "UBO role" can be assigned to senior managerial personnel: one or more directors or, in the case of a partnership firm, one or more active partners but not silent partners.

DETAILS OF YOUR ORGANISATION

Name of the legal person/organisation
Enterprise number (CBE)
Legal form
Registered office

ULTIMATE BENEFICIAL OWNER(S)

Fill in the names of the natural persons who should be designated as (pseudo-)UBOs:

Please note: there may be multiple UBOs.

Surname and first names*	Full address and place of residence*	Date and place of birth*	Nationality*	Gender*	Share %**	Control %**

* mandatory field ** one of these fields must be filled in

PRIVACY

The personal data we process is subject to the General Data Protection Regulation.

We will use the information you provide for the following purposes:

- Screening performed by TVM in order to comply with Customer Due Diligence (CDD), obligations arising from the Financial Supervision Act and sanctions legislation and regulations.
- To prevent and combat fraud against financial institutions.
- For statistical analyses.

See also, our privacy statement on: www.tvm.be/nl/privacy

DISCLAIMER

Signing this form does not constitute the conclusion of an insurance contract. An insurance contract will only be concluded once the insurer(s) has/have accepted the specified risks in writing.

SANCTIONS CLAUSE

The insurers are not bound to provide cover or indemnity under an insurance policy if this would constitute an infringement of sanctions regulations or laws that prohibit insurers from providing cover or indemnity.

ACCEPTANCE INVESTIGATION

This form is equivalent to a request for investigation as referred to in article 57, §1 of the Law of 4 April 2014 on Insurance. Depending on the data disclosed on this form, TVM reserves the right not to accept the insurance proposal and consequently not to conclude the insurance agreement.

SIGNATORIES

The persons below, being solely or jointly authorised to sign for and bindingly commit the organisation, hereby declare that they have completed this form truthfully.

By signing this form, you agree to inform TVM as soon as possible of any changes that take place concerning your organisation's UBOs, for example, a situation in which your organisation has a new UBO, if the details of your organisation's existing UBOs are modified or if your organisation's existing UBOs no longer meet the related criteria.

Signatory 1 Signatory 2

Name

Name

Position

Position

Date

Date

Town/city

Town/city

Signature

Signature

After completing and signing the form, please send it to us by post or e-mail: ubo@tvm.be

