

PAYROLL AND ACCOUNTING CLIENTS CHECKLIST

COMPANY INFORMATION - (please provide the following information)		
Company Name: (Click below to enter text)		
Physical Address: (Click here to enter a date)		
Talanhan Marahan	F Nimele	
Telephone Numbers:	Fax Number:	
Email:	Website:	
RO / RA Address: (Click here to enter a date)		
	-	
Telephone Numbers:	Fax number:	
Email:	Website:	
Contact Name: (Click below to enter text)		
Position: (Click below to enter text)		
POSITION. (Click below to enter text)		
Contact Address: (Click here to enter a date)		
Email address:	Telephone Numbers:	

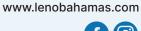


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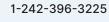
CHECKLIST		
	Business entity type: (Sole Proprietorship/LLC/Corporation)	
	Certified Copy of the Certificate of Incorporation (Incorporation Number & Date)	
	Certified copy of the Memorandum and Articles of Association (or equivalent) of the entity.	
	Certificate of Good Standing. – (not less the 6months old)	
	Certified copy of National Insurance Certificate of Registration.	
	Certified Register of Officers and Directors	
	Names and addresses of the signatories	
	Certified copies of the relevant pages of passports and proof of address for each signatory, Director.	
	Letter from RO/RA confirming that all reporting as required by the laws and regulations of The Bahamas	
	Letter from the RO/RA confirming they are in possession of the Client Information in accordance with the laws and regulations of The Bahamas.	
	Letter from the RO/RA confirming that the client is not subject to FACTA/CRS reporting.	
	Resolution of the Board of Directors authorizing the opening of the account and the signatories.	











2nd Floor Pineapple Place,