

## Ultimate Beneficial Owner (UBO) statement

### Why this form?

Insurers and other parties involved in an insurance have to comply with financial supervision regulations and legislation, such as the Money Laundering and Terrorist Financing (Prevention) Act, the Financial Supervision Act and the sanctions regulations and legislation, requiring us to conduct a customer due diligence review prior to concluding an insurance contract. The above mentioned customer due diligence review also applies when paying out claims to a third party beneficiary (not being the policy holder). Without a customer due diligence review we cannot process your proposal or payments. Part thereof is to determine the Ultimate Beneficial Owners, abbreviated to 'UBO', and check them against the sanction lists. We therefore urge you to complete this form as soon as possible.

### Who are your UBOs?

For the to be completed client due diligence, by or on behalf of the insurer, the UBO will be determined by below criteria.

**Is your organisation a legal entity**, such as an association, foundation, co-operative, mutual benefit company, public company limited by shares, private company with limited liability or a similar legal form under foreign law, then your UBO is the natural person who:

- holds a direct or indirect interest of 25% or more in the capital or assets of your organisation and/or exercises 25% or more of the voting rights at the general meeting or voting of articles of association of your organisation.
- has special control. This is understood to mean that the person has a special controlling right laid down in the articles of association for instance.
- has *effective control*<sup>(\*)</sup> of your organisation.

Note: if the shares in your organisation have been transferred to a Trust Office Foundation, the holders of the corresponding depository receipts may qualify as UBO based on the above-mentioned criteria.

**Is your organisation a one-man business or unincorporated partnership**, such as a general, trading or limited partnership or a similar legal form under foreign law, then your UBO is a natural person who directly or indirectly is entitled to 25% or more of the profits of your organisation and/or who can exercise 25% or more of the voting rights if decision-making in your organisation requires a majority of votes and/or has *effective control*<sup>(\*)</sup> of your organisation.

<sup>(\*)</sup> *effective control* of a legal entity or unincorporated partnership is the case if a natural person:

- i. has the authority to appoint or discharge the majority of a supervisory, executive or administrative body,
- ii. has control of the majority of the voting rights,
- iii. has an otherwise controlling influence on the organisation and/or
- iv. has the power of disposal of (part of) the assets of the organisation. Note: there has to be at least 1 person with effective control.

### Privacy

Personal data processing is subject to the General Data Protection Regulation. The data obtained by this form are processed for the purposes of the customer due diligence review to be conducted by insurers and other parties involved in an insurance contract in order to comply with the Customer Due Diligence (CDD) obligations arising from the Financial Supervision Act and sanction rules and laws. The data are also processed to prevent and combat fraud towards financial institutions and to carry out statistical analyses. The data may be processed by third parties to enable financial services providers to conduct (customer due diligence) reviews. The party responsible for processing the personal data obtained by this UBO form, is the legal entity named in the communication you received along with this UBO form.

### Completion instruction

The following questions have to be answered to identify the UBOs of your organisation. If you answer one or more questions with Yes, please fill in the details of these natural persons on the next page. When in doubt, please fill in the details of potential UBOs on the next page as well. **Attention: there may be more than one UBO.**

Did you answer question **1** with **Yes**, then please fill in the details of all UBOs, stating the **% Share** per UBO.

Did you answer question **2, 3** or **4** with **Yes**, then please fill in the details of all UBOs and tick the field **Control**. In addition, please fill in the details of persons with effective control<sup>(\*)</sup>. Note: there has to be at least 1 person with effective control<sup>(\*)</sup>.

If one UBO holds a **% Share** and has **Control** as well, then please state both.

If in your opinion there is no UBO we ask you to fill out the details of those persons that are authorized to make and sign off for board decisions, the so called pseudo-UBO. There must always be at least one (pseudo-)UBO. If the principal is a legal entity the natural principal of this entity is the UBO.

**Attention: This form can't be returned without (pseudo-)UBO information. Incomplete or empty forms will not be accepted.**

### Disclaimer

Signing this form has no bearing on the insurance contract. The conclusion of an insurance contract requires the prior written acceptance of the proposed risk by the insurer(s).

### Sanction provision

The insurers are not bound to provide cover or indemnity under an insurance if this would constitute an infringement on sanction regulations or legislation that prohibit insurers from providing cover or indemnity.

### Attention

If, in the context of an assessment under the Wwft, it is established that the information about a UBO in the trade register (UBO register) deviates from information that is otherwise available about the UBO with a share or control of more than 25% or a pseudo-UBO, this must be reported to the Chamber of Commerce on the basis of Article 10c paragraph 1 Wwft.

### Details of your organisation

Registration category

Registration number

Name

Address

### Questionnaire

1. Are there natural persons who hold 25% or more of the shares in the legal entity either directly or through another legal entity?

**Yes**                      **No**

2. Are there natural persons who are entitled to or have special control of 25% or more of the assets of the organisation?

**Yes**                      **No**

3. Are there natural persons who are entitled to a share of 25% or more in the profits of the organisation?

**Yes**                      **No**

4. Are there natural persons who can exercise 25% or more of the voting rights at the general meeting of the organisation?

**Yes**                      **No**

### Details of the UBO

**Per UBO, completion of all fields except Insertion(s) is required as well as 1 of the fields % Share or Control.**

#### Details (pseudo-)UBO 1

Given names	Home address
Insertion(s)	
Surname	Postcode
Gender	City
Date of birth	Country
Place of birth	
Native country	Nationality
% Share	and/or Control

#### Details (pseudo-)UBO 2

Given names	Home address
Insertion(s)	
Surname	Postcode
Gender	City
Date of birth	Country
Place of birth	
Native country	Nationality
% Share	and/or Control

**Details (pseudo-)UBO 3**

Given names	Home address
Insertion(s)	
Surname	Postcode
Gender	City
Date of birth	Country
Place of birth	
Native country	Nationality
% Share	and/or Control

**Details (pseudo-)UBO 4**

Given names	Home address
Insertion(s)	
Surname	Postcode
Gender	City
Date of birth	Country
Place of birth	
Native country	Nationality
% Share	and/or Control

**Signature**

The undersigned, either severally or jointly authorised to sign on behalf of the organisation and thereby bind it, declare(s) to have completed this form in full and truthfully.

By this signature you agree to inform the organisation from which you received this form as soon as possible in case of any change related to the UBOs of your organisation.

A case in point would be if your organisation gets a new, additional UBO, if the details of the existing UBOs of your organisation change or if existing UBOs of your organisation can no longer be considered UBO.

**Signatory 1**

Name signatory

Job title

Date Place

Signature\*

**Signatory 2**

Name signatory

Job title

Date Place

Signature\*

*\*Electronic Signing Option: By typing the word "Agree" in the text box, I declare that the word "Agree" replaces a written signature.*