

Client and associated parties	
Trust / Foundation name	Client ID
Beneficial owner(s)	Power of attorney(s) if applicable
Trustee(s)	Protector (if applicable)
Address details	
Registered address:	Mailing address (if applicable):
Source of wealth	
Please indicate the source of the assets on your account (several options can be selected)	<input type="checkbox"/> Sale of business <input type="checkbox"/> Sale of real estate <input type="checkbox"/> Inheritance / gift <input type="checkbox"/> Return on investments <input type="checkbox"/> Regular savings <input type="checkbox"/> Other (please specify)
Please indicate the total estimated amount of wealth	EUR
Please explain in a few words the origin of your wealth	
Tax residence	
Please provide your tax identification number (TIN) and your country of tax residence	
Supporting documents	
Please provide the following documents (either by email to <a href="mailto:clientduediligence@nordea.lu">clientduediligence@nordea.lu</a> or by regular mail to our registered address (see below)	<ul style="list-style-type: none"> <li>Valid ID or passport for each beneficial owner / signatory who can act on the account / power of attorney</li> <li>Proof of address for each beneficial owner / signatory who can act on the account / power of attorney (e.g. recent utility bill, certificate of residence etc.)</li> <li>Trust deed</li> <li>Extract of the company register</li> <li>Declaration of beneficial ownership (form enclosed)</li> </ul>
Signatures	
I confirm that the information provided is up to date and correct:	_____
Signature	Place and date:
_____	_____
	Name
	_____