

## Client KYC Form

**Details:**

Company Name: \_\_\_\_\_

Registration No.: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_ Website: \_\_\_\_\_

Company size: \_\_\_\_\_ Paid-Up Capital: \_\_\_\_\_ Prior Year Revenue: \_\_\_\_\_

**Primary Contact:**

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Office Tel.: \_\_\_\_\_ Direct Tel.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Email address: \_\_\_\_\_

**Accounts Department contact:**

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Office Tel.: \_\_\_\_\_ Direct Tel.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Email address: \_\_\_\_\_

**Bank Details:**

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Bank Account No.: \_\_\_\_\_ Swift Code: \_\_\_\_\_

IBAN Value No.: \_\_\_\_\_ Currency: \_\_\_\_\_

Shipper **must provide a bank-issued letter** confirming their bank details.\_\_\_\_\_  
Shipper Name & Signature\_\_\_\_\_  
Date