

SECTION A – GENERAL ADMINISTRATIVE INFORMATION

Registered name	National Bank of Fujairah PJSC	
Trading name (if different)	National Bank of Fujairah PJSC	
Registered address	P.O. Box 887, Hamad Bin Abdulla Street, Fujairah, UAE	
	Physical presence at this address? (Yes/No)	Yes
Trading address	P.O. Box 887, Hamad Bin Abdulla Street, Fujairah, UAE	
	Physical presence at this address? (Yes/No)	Yes
Banking License No. & Date Issued	BSD/799/84 issued on 29.08.1984	
License type	Commercial	
Commercial Registration No. and Expiry (if any)	Reg: 1876	
Names of the Regulator(s)	Central Bank of United Arab Emirates	
Web address	www.nbf.ae	
Name and address of external auditor	PwC – Pricewaterhouse Coopers	
SWIFT BIC address	NBFUAFAFXXX	
Are your shares publicly traded? If 'yes', list exchanges and symbols	Yes – Abu Dhabi Stock Exchange Symbol - NBF	
Name of ultimate parent company (if applicable)	N/A	
Country of incorporation of parent company	N/A	
Names and details of Senior Management (attach list where applicable)	Refer to the link provided below for details: http://www.nbf.ae/english/header/mediacentre/factsheet.aspx	

SECTION B – AML POLICIES & PROCEDURES QUESTIONNAIRE

SN.	Details	Yes	No
1	Does the country in which you are based have laws & regulations in relation to Anti-Money Laundering (AML) and Combating the Financing of Terrorism (CFT)?	Yes	
2	Is your institution subject to such laws/regulations?	Yes	
3	Is the AML Compliance program approved by the Board or a Senior Committee?	Yes	
4 a)	Do you have a written policy and operational procedures for prevention of money laundering and terrorist financing?	Yes	
4 b)	If not, are they planned to be introduced? Please indicate the estimated date of implementation:	N/A	
5	Are your policies & procedures compliant with local laws & regulations with regard to AML / CFT?	Yes	
6	Are your policies / procedures compliant with the Financial Action Task Force's (40 +9) recommendations?	Yes	
7	Are the AML/CFT policies and procedures applicable to your head office also applied to your foreign branches and majority owned subsidiaries (both local and overseas)? If 'no' please give / attach details of any units that are excluded:	Yes	
8	Does your policy require you to:	Yes	
	a) Verify the true identity of all customers prior to entering into a business relationship / undertaking any transactions?		
	b) Verify the true identity of underlying beneficial owners, if any?	Yes	
	c) Verify the source of wealth / funds and the level of economic activity of your customers?	Yes	
	d) 'Risk rate' your customer base based on criteria such as residence / volume and type of activity?	Yes	
	e) Apply enhanced customer due diligence on those customers identified as having a higher risk profile?	Yes	
	f) Periodically update due diligence information obtained?	Yes	
	g) Review the AML/CFT controls of respondent banks before opening an account for them?	Yes	

AML QUESTIONNAIRE

SN.	Details	Yes	No
9	Do you retain copies of all relevant customer Identity Documents and transactions information? If 'yes' for what period? 5 years after closure of account.	Yes (5yrs)	
10	Do you have appropriate risk management systems to determine whether a customer is a Politically Exposed Person (PEP)?	Yes	
11	Do your policies and procedures permit you to open or maintain anonymous accounts?		No
12	Do your policies and procedures permit you to conduct business with Shell banks, i.e. banks which maintain no physical presence in the country of their incorporation (except if a subsidiary of a regulated financial group)?		No
13	Are any third parties (e.g., 'payable through' accounts) allowed direct access to the account (if any) maintained with us?		No
14	If 'yes' has their identity been verified in accordance with your AML/KYC policies and procedures?		N/A
15	Does your institution comply with FATF Special Recommendation VII and ensure that full originator information is included in all payments that you make?	Yes	
16	Does your institution have procedures for identifying payments / transactions related to persons / entities (appearing in relevant regulatory lists) suspected of terrorism? If 'yes' are these automated or manual? Automated	Yes	
17	Do you have a system for detecting abnormal customer transactions or patterns of activity in relation to the expected norm? Is this manual or automated? Automated	Yes	
18	Do you have policies and procedures for the identification and reporting of transactions that are required to be reported to the authorities?	Yes	
19	Does your institution have an established audit and / or compliance review function to test the adequacy of compliance with your AML / CFT policies and procedures?	Yes	
20	Do the Regulatory body / competent authority in your country conduct AML / CFT reviews of your institution. If 'yes' with what frequency:	Yes (bi-annually)	

SECTION B – AML POLICIES & PROCEDURES QUESTIONNAIRE (Contd...)

SN.	Details	Yes	No
21	To the best of your knowledge are you in compliance in all material respects with all relevant AML / CFT laws and regulations?	Yes	
22	Has your institution been subject to any investigation, indictment, conviction or civil enforcement related to money laundering and terrorism financing in the past five years? If 'yes' please attach details.		No
23	Does your institution have an established employee training program to teach employees about money laundering and to assist them in identifying suspicious transactions? If 'yes' with what frequency is training required? Annually	Yes	
24	Does your institution retain records of its training session including attendance records and relevant training materials used	Yes	
25	Where cash transactions reporting is mandatory , does your institution have procedure to identify transactions structure to avoid such obligation	Yes	
26	Does your institution have policy to reasonably ensure that it only operates with correspondent banks that process license to operate in their country of origin	Yes	
27	Does your institution assess its FI customers AML policy & procedure	Yes	

SECTION C – CONTACT DETAILS

Has your institution appointed a Money Laundering Reporting Officer (MLRO)? If 'yes' please provide:

Name:	FIDDA ISMAIL MOHAMMAD	Phone:	+971 45078346
Address	National Bank of Fujairah PSC PO Box 2979, Dubai, United Arab Emirates	Fax:	9714 3976551
Title	Manager - AML	E-Mail	fiddail@nbf.ae

ACKNOWLEDGEMENT OF RESPONSIBILITIES

We confirm that:

AML QUESTIONNAIRE

- a) We will ensure that full due diligence is performed on all our customers who are party to any transactions involved National Bank of Fujairah P.J.S.C (NBF) or upon whose behalf payments are to be routed through accounts (if any) maintained with you.
- b) We will not allow a third party direct access to the account without prior notification to NBF.

I certify that I am authorized to complete this questionnaire and that to the best of my knowledge the information given is complete and correct

Abraham David Pije

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Name(s)

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Signature:

Date: 10th May 2018

Where different to Section C above, form completed by:

Name:	Abraham David Pije	Phone:	+971 45078366
Address	National Bank of Fujairah PSC PO Box 2979, Dubai, United Arab Emirates	Fax:	9714 3976551
Title	Head of Compliance	E-Mail	David.Pije@nbf.ae