

ESTABLISHMENT FORM

GUIDANCE NOTES & DEFINITIONS

Certified Copy Passport

Certified copy of passports are required (photo and pages which confirm signature, date and place of birth) of the Founder, Protector (if any), Council Members (if any) and Beneficiaries. Certification must be by a suitable person such as a lawyer, accountant, a director or manager of a regulated financial institution, a notary public, a member of the judiciary, a senior civil servant or a serving police officer.

The certifier should legibly sign the copy document and clearly indicate his capacity or position on it and, in the case of a passport, must state that the photograph bears a true likeness of the bearer. Please note that all copy documents provided to us should be clearly legible, particularly those documents containing photographs and signatures.

Proof of Address

This requirement may be fulfilled by providing a recent utility bill, current year local tax authority bill, current photocard driving licence (provided it contains the individual's relevant address), bank, building society or credit union statement or passbook containing current address or most recent original mortgage statement from a recognised lender. Any copy document must be certified by either a lawyer, banker or other regulated person and must be legible.

Reference

References are required from two independent professionals who know the Founder (one reference in respect of the Protector) in a professional capacity (not simply an acquaintance). For example, a lawyer, accountant or a director or manager of a regulated financial institution. The reference should state the full name of the Founder/ Protector, full residential address, date of birth and the length of time (not less than one year) that the referee has known the Founder/Protector.

References provided should be current, i.e. not older than one month.

The reference should be addressed to Trident Corporate Services (Bahamas) Limited. References addressed "To Whom it may Concern" are not acceptable.

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PURPOSE OF THE FOUNDATION

- Proposed name of the Foundation.
- Please provide two alternatives in order of preference.

1. _____

2. _____

3. _____

Please explain the purpose for which the Foundation is to be established.

PROFESSIONAL INTERMEDIARY CONTACT INFORMATION

Company/Firm/Individual _____

Address _____

Phone _____ Fax _____

Email _____

Name of Contact Person _____

Type of Organisation Law Firm Accounting Firm Bank Other (please provide details)

If the intermediary is regulated/licensed by a supervisory authority, please provide the name of the authority and the intermediary's licence/registration number.

Name of Authority _____

Licence/Registration Number _____

FOUNDER INFORMATION

Note: This refers to the person who establishes the Foundation.

Name _____

Residential Address _____
(including post code)

Contact telephone numbers _____ Contact fax numbers _____

Home _____ Home _____

Work _____ Work _____

Mobile _____

Email Home _____ Work _____

Nationality _____ Occupation _____

Date of Birth _____ Place of Birth _____

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How should we contact you? (Please click or tick box as appropriate.)

- Through intermediary Mail to home address Telephone Facsimile Email
 Other (please provide details)

Address in The Bahamas for service of documents: *(if other than Trident Corporate Services (Bahamas) Ltd)*

If different from Section B, please provide the contact details of the professional organisation that has provided the Founder with legal/tax advice. Please note that we may require a copy of this advice for compliance purposes.

Name of Professional Organisation

Address

Phone

Fax

Email

Name of contact person

How were you referred to Trident Trust?

Please provide the following documentation for the Founder: (Please see Guidance Notes & Definitions for an explanation of the items required.)

- Certified copy passport
- Proof of address
- References from two professionals

FOUNDATION COUNCIL INFORMATION (If Applicable)

Name

Address

Phone

Fax

Email

Name

Address

Phone

Fax

Email

In respect of each Council member, please provide the following documentation. (Please see Guidance Notes & Definitions for an explanation of the items required.)

- Certified copy passport
- Reference from a professional

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PROTECTOR INFORMATION (If Applicable)

Name _____

Address _____

Phone _____ Fax _____

Email _____

In respect of the Protector, please provide the following documentation. (Please see Guidance Notes & Definitions for an explanation of the items required.)

- Certified copy passport
- Reference from a professional

BENEFICIARY INFORMATION**Beneficiary 1**

Name _____

Address _____

Phone _____ Fax _____

Email _____ Nationality _____

Date of Birth _____ Place of Birth _____

Beneficiary 2

Name _____

Address _____

Phone _____ Fax _____

Email _____ Nationality _____

Date of Birth _____ Place of Birth _____

Beneficiary 3

Name _____

Address _____

Phone _____ Fax _____

Email _____ Nationality _____

Date of Birth _____ Place of Birth _____

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Beneficiary 4

Name _____

Address _____

Phone _____ Fax _____

Email _____ Nationality _____

Date of Birth _____ Place of Birth _____

In respect of each Beneficiary, please provide the following documentation. (Please see Guidance Notes & Definitions for an explanation of the items required.)

- Certified copy passport

FOUNDATION PERIOD

Please specify the period for which the Foundation is to be established. If not stated, it will be considered "indefinite".

FOUNDATION ASSETS

Please identify the value of the initial assets that will be transferred to the Foundation. (Please note that the minimum amount is US\$10,000.)

Please provide details of the origin and source of the assets to be held by the Foundation. (We may seek documented confirmation of the source of the initial and subsequent funds and we reserve the right to request the provision of such.)

Are some of the assets shares in a company? Yes No

If yes, please provide the information on the business of each company:

Company Name _____

Address _____

Company Name _____

Address _____

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Company Name _____

Address _____

Company Name _____

Address _____

For each company, please also provide

- Register of Directors & Officers
- Register of Members
- Financial statements for the company

OTHER INFORMATION

Please provide below any additional information you consider appropriate for the establishment of the Foundation.

DECLARATION

We declare and affirm that the information provided herein is true and correct and that the assets to be introduced/ settled into the Foundation are from lawful sources and not deemed to be illegal or immoral either in the Founder/s/ Founders' country of origin or country/countries of ordinary residence. If requested to do so, we will provide Trident Trust with any further evidence of verification of the identity or activities of any relevant individuals.

Completed by

Name _____ Title _____

Capacity _____

Signature _____ Date _____

Please contact any Trident Trust office worldwide for further information.
Office contact details are included on the following page.

Trident Corporate Services (Bahamas) Ltd
Suite 200B, 2nd Floor
Centre of Commerce, One Bay Street
PO Box N-3944, Nassau, Bahamas
Tel +1-242-322-6154
Fax +1-242-328-1064
bahamas@tridenttrust.com

EUROPE
GUERNSEY

Trident Trust Company (Guernsey) Ltd
 Tel +44-1481-727571
 Fax +44-1481-723162
 guernsey@tridenttrust.com

ISLE OF MAN

Trident Trust Company (IOM) Ltd
 Tel +44-1624-646700
 Fax +44-1624-620588
 iom@tridenttrust.com

JERSEY

Trident Trust Company Ltd
 Tel +44-1534-733401
 Fax +44-1534-727195
 jersey@tridenttrust.com

LUXEMBOURG

Trident Trust Company (Luxembourg) S.A.
 Tel +352-95-05-74-74
 Fax +352-95-91-11
 luxembourg@tridenttrust.com

MALTA

Trident Trust Company (Malta) Ltd
 Tel +356 21 434 525
 Fax +356 21 434 595
 malta@tridenttrust.com

SWITZERLAND

Zurich
Trident Corporate Services AG
 Tel +41-44-396 1080
 Fax +41-44-396 1081
 switzerland@tridenttrust.com

Geneva

Integritas Trust S.A.
 Tel +41-22-715-2760
 Fax +41-22-732-3674
 switzerland@integritastrust.com
 www.integritastrust.com

UNITED KINGDOM

Trident Trust Company (UK) Ltd
 Tel +44-20-7935-1503
 Fax +44-20-7935-7242
 uk@tridenttrust.com

Trident Company Services (UK) Ltd

Tel +44-20-7487-0460
 Fax +44-20-7487-0461
 corpserVICES@tridenttrust.com

THE AMERICAS / CARIBBEAN
BAHAMAS

Trident Corporate Services (Bahamas) Ltd
 Tel +1-242-322-6154
 Fax +1-242-328-1064
 bahamas@tridenttrust.com

Integritas Trust Company Ltd

Tel +1-242-322-2200
 Fax +1-242-322-2030
 bahamas@integritastrust.com
 www.integritastrust.com

BARBADOS

Trident Corporate Services (Barbados) Ltd
 Tel +1-246-431-0760
 Fax +1-246-431-0591
 barbados@tridenttrust.com

BRITISH VIRGIN ISLANDS

Trident Trust Company (BVI) Ltd
 Tel +1-284-494-2434
 Fax +1-284-494-3754
 bvi@tridenttrust.com

CAYMAN ISLANDS

Trident Trust Company (Cayman) Ltd
 Tel +1-345-949-0880
 Fax +1-345-949-0881
 cayman@tridenttrust.com

NEVIS

Meridian Trust Company Ltd
 Tel +1-869-469-1333
 Fax +1-869-469-0968
 nevis@tridenttrust.com

PANAMA

Trident Trust (Panama) S.A.
 Tel +507-302-7494
 Fax +507-302-7497
 panama@tridenttrust.com

UNITED STATES

New York
Trident Corporate Services, Inc
 Tel +1-212-840-8280
 Fax +1-212-944-5923
 nyc@tridenttrust.com

Atlanta

Trident Corporate Services, Inc
 Tel +1-404-233-5275
 Fax +1-404-233-9629
 usa@tridenttrust.com

Sioux Falls

Trident Trust Company (South Dakota) Inc
 Tel +1-605-679-4355
 Fax +1-605-679-4357
 sd@tridenttrust.com

Miami

Integritas, Inc
 Tel +1-305-405-9006
 Fax +1-305-416-3143
 usa@integritastrust.com
 www.integritastrust.com

US VIRGIN ISLANDS

Trident Trust Company (VI) Ltd
 Tel +1-340-774-7322
 Fax +1-340-776-0651
 usvi@tridenttrust.com

ASIA / PACIFIC
HONG KONG

Trident Corporate Services (Asia) Ltd
 and **Trident Trust Company (HK) Ltd**
 Tel +852-2805-2000
 Fax +852-2850-4090
 hongkong@tridenttrust.com

NEW ZEALAND

Trident Trust Company (NZ) Ltd
 Tel +64-9-300-6067
 Fax +64-9-366-1482
 nz@tridenttrust.com

Integritas New Zealand Ltd

Tel +64-9-300-6067
 Fax +64-9-366-1482
 nz@integritastrust.com
 www.integritastrust.com

SINGAPORE

Trident Trust Company (Singapore) Pte Ltd
 Tel +65-6304 3288
 Fax +65-6491 1231
 singapore@tridenttrust.com

MIDDLE EAST / AFRICA
CYPRUS

Trident Trust Company (Cyprus) Ltd
 Tel +357-258-20-650
 Fax +357-253-61-857
 cyprus@tridenttrust.com

Trident Fiduciaries (Middle East) Ltd

Tel +357-253-53-520
 Fax +357-258-18-808
 fiduciariesme@tridenttrust.com

DUBAI

Trident Trust Company (UAE) Ltd
 Tel +971-4-423-9988
 Fax +971-4-450-4411
 dubai@tridenttrust.com

MAURITIUS

Trident Trust Company (Mauritius) Ltd
 Tel +230-210-9770
 Fax +230-210-1266
 mauritius@tridenttrust.com

SEYCHELLES

Trident Trust Company (Seychelles) Ltd
 Tel +248-4-422-000
 Fax +248-4-422-010
 seychelles@tridenttrust.com