

The following information is required to establish a Panama Foundation.

PURPOSE OF THE FOUNDATION Proposed name of the Foundation. (Please note that the name must include the word Foundation.)				
For our information only, please pro	ovide details of the purpose for which the Foundation is to be established.			
PROFESSIONAL INTERM	MEDIARY CONTACT INFORMATION			
Company/Firm/Individual				
Address				
Phone	Fax			
Email				
Name of Contact Person				
Note: This refers to the person who e	O N establishes the Foundation. The information provided will be publically available.			
Nationality	Occupation			
Date of Birth	Place of Birth			
Residential Address including post code				
Phone	Fax			
Email				
How should we contact you? (Pleas Through intermediary Mail to home address	on purposes. Please use TPAN Fiduciary founder. se select box as appropriate.)			
☐ Telephone☐ Fax☐ Email☐ Other (please provide details)				



Please confirm that the Founder has obtained legal/tax advi	ce.	□ Confirmed
Please describe below how you were referred to Trident.		
Please provide the following documentation for the Founde • Certified copy passport	r.	
Proof of address		
References from two professionals		
FOUNDATION COUNCIL INFORMATIO	N	
Note: If using a corporate entity, the Foundation Council may be comprised of a single member. If natural personare to comprise the Foundation Council, it is necessary to appoint a minimum of three members.		
Name		
Address		
Phone	Fax	
Email		

Fax

Fax

Name

Email

Name
Address
Phone

Address

Phone

Email

Please state the responsibilities and powers of the Foundation Council.

In respect to each Council member, please provide the following documentation.

- Certified copy passport
- Reference from a professional



PROTECTOR INFORMATION (If Applicable)

Please state the responsibilities and powers of the Protector.

Name	
Address	
Phone	Fax

In respect of the Protector, please provide the following documentation.

- Certified copy passport
- Reference from a professional

BENEFICIARY INFORMATION

Beneficiary 1

Email

Name	
Date of Birth	Place of Birth
Address	
Phone	Fax
Email	
Beneficiary 2	
Name	
Date of Birth	Place of Birth
Address	
Phone	Fax
Email	
Beneficiary 3	
Name	
Date of Birth	Place of Birth
Address	
Phone	Fax



Beneficiary 4

Name		
Date of Birth	Place of Birth	
Address		
Phone	Fax	
Email		

In respect of each Beneficiary, please provide the following documentation.

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.)

OTHER INFORMATION

Please provide below any additional information you consider appropriate for the establishment of the Foundation (e.g., whether the Foundation is irrevocable, the address of the Foundation, arbitration clauses, change of jurisdiction/redomiciliation and meetings).

DECLARATION

I declare and affirm that the information provided herein is true and correct and that the assets to be transferred to the Foundation are from lawful sources and not deemed to be illegal or immoral in the Founder's country of origin or country of ordinary residence. If requested to do so, I will provide Trident Trust with any further documentation.

Completed by			
Name	Title		
Capacity			
Signature	Date		



GUIDANCE NOTES

Certified Copy of 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 or a notary public.
- Please note that all copy documents provided to us should be clearly legible, particularly documents containing photographs and signatures.

Proof of Address

- This requirement may be fulfilled by providing:
 - a recent utility bill;
 - a current year local tax authority bill;
 - a current photocard driving licence (provided it contains the individual's relevant address); or
 - a bank statement.
- The document provided must reflect the current address of the individual. Any copy document must be certified as for a passport.

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 three months.
- The reference should be addressed to the Trident Trust Group Corporate Services Division. References addressed "To Whom it may Concern" are not acceptable.

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

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MIDDLE EAST/AFRICA

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