

[NAME OF LAW PRACTICE]
Sample Client Due Diligence Checklist

MATTER NO.:		DATE OF RECORD:	
NAME OF CLIENT:		FILED BY:	
SUBJECT MATTER:			

This Checklist is designed to assist lawyers and law practices in their compliance with the Legal Profession Act, Legal Profession (Prevention of Money Laundering and Financing of Terrorism) Rules 2015 (“Rules”) and the Council’s Practice Direction 3.2.1 on Prevention of Money Laundering and Financing of Terrorism.

Certain sections in this Checklist require the signatures from the lawyer/partner/director/proprietor of the law practice. Documents and records obtained through client (customer) due diligence measures must be maintained for at least 5 years.

SECTION A: EXISTING CLIENT *(Rule 14; PD 3.8)*

A(1) Identity Waiver for Existing Client

Is the Client an existing client who has been in contact with the law practice for the last 5 years? (Note: Existing clients who have not been in contact with the Practice for last 5 years or more do not qualify for identity waivers.)	Yes <input type="checkbox"/> Complete A(2) below and Proceed to Section B or C
--	---

A(2) Profile of Existing Client Waived

Category A Clients
 Formal identification of the Client was provided to the law practice on first contact and I have been in contact with the Client for the last 5 years since. I am satisfied the identification documents are adequate.

I am satisfied that the risk of money laundering and terrorist financing is low, I propose that the file be opened, and instructions accepted.

Signed by: _____ Name and Signature of Engagement Lawyer _____ Date	Approved by Partner / Director / Sole Proprietor: _____ Name and Signature _____ Date
---	---

SECTION B: FOR NEW CLIENTS WHO ARE NATURAL PERSONS (Rule 6; PD 3.6)

If waiver is obtained under Section A, please complete B(3) – B(5).

B(1) Particulars of Individual

Name:	Gender : Male / Female *(Delete Where Applicable)
Address:	
Date of Birth:	Passport / NRIC No.: *(Delete Where Applicable)
Nationality:	Occupation:

B(2) Documents, Data or Information to Verify Identity

Documents obtained from client (where these are copies, originals have been sighted):

- Passport/NRIC/FIN No.
- Proof of address
- Other documents, data or information (To provide description):

B(3) Politically – Exposed Individual

(a) Is your client a politically-exposed individual?

- Yes No

If yes, describe the nature of the prominent public function the person is or has been entrusted with as a foreign or domestic politically-exposed individual/or the nature of the prominent function the person has been entrusted with in an international organization:

(b) Is your client a family member of a politically-exposed individual?

- Yes No

If yes, describe the nature of the person's relationship with the politically-exposed individual : _____

(c) Is your client a close associate of a politically-exposed individual?

- Yes No

If yes, describe the nature of the person's relationship with the politically-exposed individual:

Attach all documents on screening and searches performed (if any) for politically-exposed individuals, their family members and close associates.

B(4) Business Relationship

Provide information on the purpose and intended nature of the business relationship:

B(5) Risk Profile

Risks of money laundering and the financing of terrorism (taking into account the above information and stating reasons for the grading):

- Low Risk
- High Risk – Complete Section H (Enhanced Client Due Diligence)

Reasons:

(Note – if the Client or beneficial owner is a (i) domestic politically-exposed individual, or (ii) an individual entrusted with a prominent function in an international organization, or (iii) a family member or close associate of such an individual – enhanced client due diligence must be performed if the business relationship is assessed to be a higher risk business relationship.)

SECTION C: FOR NEW CLIENTS WHO ARE ENTITIES OR LEGAL ARRANGEMENTS (Rule 8; PD 3.6)

If waiver is obtained under Section A, please complete C(3) – C(9).

C(1) Particulars of Entity/Description of Legal Arrangement

Name of Entity: Type of Legal Arrangement:

Express trust

Nature of the client's business: Other legal arrangement

(To provide description): Type of Entity:

Sole proprietorship

Partnership

Limited partnership

Limited liability partnership

Company

Other association or body of persons corporate or incorporate: _____

Is the Client a Ministry or department of the Singapore Government, an organ of the Singapore State or statutory board in Singapore; or a ministry or department of the government of a foreign country (Rule 6(3) of the Rules; PD 3.7):

Yes No

If yes, describe the Client: _____

(Note – If yes, C(1) – C(2) need not be completed unless there is suspicion that the Client may be engaged in, or the business relationship may involve engagement in, money laundering or the financing of terrorism.)

Country of Incorporation / Registration/ Constitution:

Address of Registered Office:

Address of principal place of business (to be completed if the registered office is not the principal place of business):

C(2) Documents, Data or Information to Verify Identity

ACRA business profile

Constitution or memorandum and articles of association

Trust deed (if Client is an express trust)

Other documents, data or information

(To provide description):

Particulars of Sole Proprietor/ Directors / Partner/ Executive Committees (*where applicable*) of the entity to be attached. Particulars of each trustee of the legal arrangement to be attached.

C(3) Waiver of Client Due Diligence Measures for Beneficial Ownership

Is the Client listed in Rule 8(4) of the Rules; PD 3.7:

Yes No

If yes, describe the Client: _____

(Note - If yes, C(4) – C(6) need not be completed unless there is suspicion that the Client may be engaged in, or the business relationship may involve engagement in, money laundering or the financing of terrorism.)

C(4) Particulars Of Beneficial Owner(s)

Provide information of nature of beneficial ownership (e.g. more than 25% of ownership of the client):

Name:	Gender: Male / Female *(Delete Where Applicable)
-------	--

Address:

Date of Birth:	Passport / NRIC No.: *(Delete Where Applicable)
----------------	---

Nationality:	Occupation:
--------------	-------------

C(5) Nature of Business, Ownership and Control Structure of Client

Provide information of nature of business, and ownership and control structure of the Client:

C(6) Documents, Data or Information to Verify Identity of Beneficial Owner

- ACRA business profile
- Constitution or memorandum and articles of association

- Trust deed (if client is an express trust)
- Other documents, data or information
(To provide description):

C(7) Politically-Exposed Individual

(a) Is the beneficial owner (if any) a politically-exposed individual?

- Yes
- No

If yes, describe the nature of the prominent public function the person is or has been entrusted with as a foreign or domestic politically-exposed individual/or the nature of the prominent function the person has been entrusted with in an international organization:

(b) Is the beneficial owner a family member of a politically-exposed individual?

- Yes
- No

If yes, describe the nature of the person's relationship with the politically-exposed individual: _____

(c) Is the beneficial owner a close associate of a politically-exposed individual?

- Yes
- No

If yes, describe the nature of the person's relationship with the politically-exposed individual: _____

(Attach all documents on screening and searches performed (if any) for politically-exposed individuals, their family members and close associates.)

C(8) Business Relationship:

Provide information on the purpose and intended nature of the business relationship; and if applicable, the source of funds.

SECTION D: RELIANCE ON THIRD PARTY TO CONDUCT CLIENT DUE DILIGENCE *(Rule 17; PD 3.10)*

Name of third party:

Country of Incorporation / Residence (if individual):

Third party is a Legal Professional / Auditor / Financial Institution / Others * *(Delete where applicable)*

Details of Others: _____

Third party is subject to and supervised for compliance with requirements for the prevention of money laundering and the financing of terrorism consistent with the standards set by FATF

Yes

No

Third party has measures in place for compliance with those requirements

Yes

No

Third party is able and willing to provide without delay, upon request by the law practice (where necessary), all source documents, data or information that have been obtained by the third party

Yes

No

Third party may be relied upon to perform client due diligence measures if the above conditions are all met. (Third party cannot be relied upon to perform ongoing client due diligence on the business relationship.)

If the third party is relied on to perform client due diligence measures, all information required as part of the client due diligence measures, must be obtained from the third party.

Comments:

SECTION E: ONGOING CLIENT DUE DILIGENCE ON THE BUSINESS RELATIONSHIP *(Rule 9; PD 3.13)*

Date(s) of Review undertaken:

Whether transactions undertaken are consistent with the information in Sections C and D:

Yes No

Whether client due diligence data, documents and information are relevant and kept up-to-date

Yes No

Risk Profile (Post-Review):

Low Risk

High Risk – Complete Section H (Enhanced Client Due Diligence)

Reasons:

Reasons to retain existing client (where there are grounds to suspect the business relationship involves engagement in money laundering or financing of terrorism):

Nature of risk mitigation measures:

Complete Section H (Enhanced Client Due Diligence)

Comments:

SECTION F: ENHANCED CLIENT DUE DILIGENCE FOR HIGH RISK CLIENTS *(Rule 13; PD 3.14)*

Obtain approval of senior management before:

In the case of a new client, establishing a business relationship with the client; or In the case of an existing client, continuing a business relationship with the client.

Comments:

Provide information on source of wealth of the client, and if the client is an entity or legal arrangement, of the beneficial owner of the client:

Provide information of the source of funds of the client, and if the client is an entity or legal arrangement, of the beneficial owner of the client:

Nature of enhanced ongoing monitoring of the business relationship:

SECTION G: INABILITY TO COMPLETE CLIENT DUE DILIGENCE MEASURES

(Rule 15; PD 3.15)

Comments:

(Note – A deferral of the completion of certain client due diligence measures is allowed if the law practice adopts internal risk management policies and procedures under which a business relationship may be established before the completion of the relevant client due diligence measures; and the legal practitioner/law practice completes the relevant client due diligence measures as soon as is reasonably practicable (Rule 11; PD 3.12).)

SECTION H: APPROVALS

I certify that the information above is correct and accurate to the best of my knowledge.

Signed by Engagement Lawyer

Approved by Compliance Officer (if any)

Name and Signature

Name and Signature

Date

Date

For High Risk Cases, approval to establish a business relationship/continue a business relationship from Senior Management required and obtained from:

Signed by

Signed by

Name and Signature

Name and Signature

Designation

Designation

Date

Date

SECTION I: INABILITY TO COMPLETE CLIENT DUE DILIGENCE MEASURES

(Rule 15; PD 3.15)

Comments:

(Note – A deferral of the completion of certain client due diligence measures is allowed if the law practice adopts internal risk management policies and procedures under which a business relationship may be established before the completion of the relevant client due diligence measures; and the legal practitioner/law practice completes the relevant client due diligence measures as soon as is reasonably practicable (Rule 11; PD 3.12).)

SECTION J: APPROVALS

I certify that the information above is correct and accurate to the best of my knowledge.

Signed by Engagement Lawyer

Approved by Compliance Officer (if any)

Name and Signature

Name and Signature

Date

Date

For High Risk Cases, approval to establish a business relationship/continue a business relationship from Senior Management required and obtained from:

Signed by

Signed by

Name and Signature

Name and Signature

Designation

Designation

Date

Date