



Please provide all of the information required in this document. If you have any queries, contact our Project Manager.



Company Information

Company Name		Trading name, if different Registered Address, if different		
Trading Address				
Address Line 1		Address Line 1		
City		City		
Postcode		Postcode		
Country		Country		
Other countries where	e the company has a ph	ysical presence		
Company Type	Industry	Company Registration Number		
 VAT	Website	Industry SIC Code		
Primary Contact D	etails			
First Name	Last Name	Telephone		
Email (where confirm	ations will be sent)			

Source of Account Funding

SFE will accept funds from company bank accounts in the name of the company which have been disclosed and approved. Any funds from undisclosed bank accounts could be declined or result in delays. We would advise you to keep us updated of any changes to company bank accounts to avoid any unnecessary delays. Any funds received from sources other than the company bank accounts provided could be declined unless prior approval is obtained.



 Account Name
 Bank Name
 Sort Code/Swift Code

 Code Bank Country

Ultimate Beneficial Ownership/ Ownership Structure

Please identify and provide details of all individuals with 25% or more shareholding or voting rights below. Where there is no one individual with 25% or more shareholding or voting rights, please identify and provide the details below of at least two individuals who are nominated officers or directors of the firm (e.g. CEO, Managing Director, Finance Director, etc.). If there is more than one level of ownership please provide separately a company ownership structure chart, identifying all individuals and legal entities. Additionally, if the company is partially or fully owned by a trust, please provide the trust deeds or extracts of the trust deeds identifying the Trustee(s), Settlor(s), Protector(s) and/or Beneficiary(s).

UBO 1	
Full Name	
Ownership %	
Date of Birth	
Residential Address	
UBO 2	
Full Name	
Ownership %	
Date of Birth	
Residential Address	

SFE Société Financière Européenne

UBO 3

Full Name	
Ownership %	
Date of Birth	
Residential Address	

Please also specify if there are Individuals who owns 25% or more.

By signing this Application form, I/We agree that:

I/We have the authority to bind the business. [1] All information provided in this application is true and correct. We will provide any supporting documentation which may be required by SFE.

Signed	 	
Name	 	
Title	 	
Date		

If the signer is not listed in the Ownership Structure above please provide the following:

Signed

Name

Title

Date _____

Please upload additional documentation here or email to:

info@sfefinance.com