# **BUYER REGISTRATION AND KYC (KNOW YOUR CUSTOMER) FORM**

Important notes:

- A. If you're buying for a company, you must fill out Section #2 and make payment from the company's bank account or company card.
- B. If you're buying for yourself, you must pay from your own personal bank account or card (in your name).
- C. If you're acting on someone else's behalf, you must fill out this form for both yourself and the person or company you represent.

## **#1. YOUR PERSONAL DETAILS** \* Required section

Bank Country: (From which country will payment be sent?)	
Full Name:	
Passport / ID Number: Please kindly provide a copy of your ID along with completed form	
Nationality:	
Valid until:	
Address: Please provide proof of your address (e.g., a utility bill, bank statement, or any government-issued document) along with the completed form. The document must be dated within the last 3 months. Also <b>specify your country</b> if it differs from bank's country.	
Email:	
Phone:	

## #2. YOUR PROFESSIONAL DETAILS \* Required section

<b>Profession:</b> Specify your current professional status, such as self-employed, employed by a company, retired (receiving a pension), or any other relevant activity.			
Position:			
Name of the company you are employed by or represent in your professional capacity (if applicable):			
Scope of your professional activity:	International	National	
Professional address (if different):			
Professional email (if different):			
Website (if any):			

## #3. FINANCIAL DATA \* Required section

ness profits):	
):	
Using virtual currencies	International trade (import/export)
Military/arms industry	Mining/extractive industry
Hardware/scrapyard	Sending/remittances/currency exchanges
Jewelry/precious stones and metals	Casinos/gambling, land-based or online
	: Using virtual currencies Military/arms industry Hardware/scrapyard

# #4. POLITICALLY EXPOSED PERSON (s) (PEP):

Have **you**, or any **person closely related to you** (including your spouse or equivalent, children, parents, or individuals with whom you jointly control entities or legal structures), ever held a prominent public function or a position of political, judicial, military, or administrative nature, or a role in a state-owned enterprise?

YES NO - \* Required field

- If YES: We will send you the Declaration of Political Exposure form if applicable.
- If NO: I hereby declare that neither I nor any related person, as defined above, has ever held such a position.

#### **#5. COMPANY DETAILS** Required for companies only

If you are buying for yourself as an individual, please ignore this section.

Company name:		
VAT (if applicable):		
Your role in the company:	Owner Director Intermed	iary Authorized Representative
Registered address:		
Business email:		
Business phone:		
Nature of the Legal Entity:		Main activity:
Company with commercial or business activity	Foundation Patrimonial or instrumental company	
Association	Listed/Regulated market	
Other (please specify):		
Is cash usage frequent in your business activity? S Yes No		Scope of activity: International National
If yes, cash income represe < 50 % >= 50 %	nts what % of total revenue?	Does the legal entity have subsidiaries/branches abroad?   No Yes * Where? (Specify: )

#### Ultimate Beneficial Owner(s) - persons owning more than 25% of the company:

Full Name / Company Name	Passport/ID	% Ownership	Country of Residence

Please kindly provide ID and proof of address (e.g., a utility bill, bank statement, or any government-issued document) for **every beneficial owner** along with completed form. *The document must be dated within the last 3 months.* 

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## #6. SIGNATURE(S)

## By signing this document, I/We hereby declare:

#### 1. Tax Compliance

For individuals: That I am not currently, nor have I previously been, involved in any tax verification or inspection procedure. If I am or have been, I provide all relevant documentation related to such procedures.

For legal entities: That the legal entity is not currently, nor has it previously been, a party to any tax audit or inspection procedure. If it is or has been, all related documentation is provided.

### 3. Legitimacy of Funds

I warrant that neither I, nor the legal entity (if applicable), am subject to EU, US, or UK sanctions, nor am I listed on any sanctions-related designated persons lists, including but not limited to the Specially Designated Nationals (SDN) list.

\* If I am acting as an agent, I further warrant that my client is also not subject to EU, US, or UK sanctions and is not listed on any sanctions-related designated persons lists, including the SDN list.

\* If you are signing on behalf of a company, please sign in your official capacity and ensure all required company documents are attached.

\* By submitting this form, I consent to the processing of my personal data in accordance with the General Data Protection Regulation (EU 2016/679), and I accept the Terms and Conditions of Aurora & Athena, publicly available at: https://auroraathena.com/terms-and-conditions/.

#### 2. Accuracy of Information

That all the information provided in this form is true, accurate, and complete. I/We authorize the company to verify this information and, if necessary, to request or obtain additional data to complete the verification process.

#### 4. Sanctions Compliance

That the funds I/We use to complete any transaction, as well as the origin of such funds or assets, are lawful and comply with applicable legal and regulatory requirements.

Date:
Signature:

Please complete this form and send it, along with the required documents (a copy of your ID, proof of address, and company documentation if applicable), to **contact@auroraathena.com**.