

VERIFICATION OF IDENTITY FORM FOR PRIVATE INDIVIDUALS

Please complete both sides of the form Note: Send page one only to the product provider

Please complete a separate certificate for all parties to the contract (e.g. joint applicants, trustees, settlors and third parties) where you have been required to undertake identification.

1. DETAILS OF INDIVIDUAL

Name of Applicant* / Trustee* / Third Party (provide relationship to the applicant)* (in full)

*Delete as applicable

| | | | |
|---|---------|--|---------|
| VALENTIE LYNN DOBSON | | | |
| Date of Birth | 7/12/47 | Nationality | British |
| Current Address | | Normal Country of Residence | |
| 10 OTLEY MOUNT EAST MORTON KEIGHLEY WEST YORKSHIRE BD20 5TD | | UK | |
| | | Previous address if applicant has changed address in the last three months | |

2. CONFIRMATION

FACE TO FACE / NON FACE TO FACE APPLICATION *

*Delete as applicable

I/WE CONFIRM THAT (please tick the box beside either Section A or Section B)


| | |
|---|-------------------------------------|
| Section A | |
| (a) the information in section 1 above was obtained by me/us in relation to the customer; (b) the evidence I/we have obtained to verify the identity of the customer: [tick only one] | |
| meets the standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG; | <input checked="" type="checkbox"/> |
| exceeds the standard evidence (written details of the further verifications evidence taken are attached to this confirmation) | <input type="checkbox"/> |

| |
|-------------------------------------|
| Tick |
| <input checked="" type="checkbox"/> |

| |
|---|
| Section B |
| I/We have not verified the identity of the Applicant for the following reason(s): |
| |

| |
|--------------------------|
| Tick |
| <input type="checkbox"/> |

| | |
|------------------------------|------------------------------|
| Full Name of Regulated Firm: | RMP Financial LLP |
| Name of Regulator: | Financial Services Authority |
| Regulator Reference Number: | 534520 |

| | |
|-----------|---|
| Signed*: |  |
| Name: | R. JOHNSON |
| Position: | MANAGING PARTNER |
| Date: | 14/1/14 |

Company Stamp:

RMP Financial LLP
Monkswell House, Manse Lane
Knaresborough, HG5 8NQ
FSA No: 534520

Note that this certificate must be signed by the person who has seen the original documentary evidence.

| Evidence of Full Name and either Residential Address or Date of Birth (Government issued with photograph) | Reference/ account number | | | | | Certified copy attached?(2) |
|---|------------------------------|---------------------------|----------------|---------------|----------------|-----------------------------|
| Current Signed Passport or EEA State Identity Card | J06525367 | Issuing Authority/Country | Place of Birth | Date of Birth | Date of Expiry | Yes |
| Resident Permit issued to EU nationals by Home Office | | | | | Date of Expiry | |
| Current UK Photo Driving Licence (including Blue Disabled Driver's Pass) | | | | | Date of Issue | |
| Firearms/ shotgun certificate | | Issuing Authority | | | Date of Issue | |

| Evidence of Full Name and either Residential Address or Date of Birth (Government issued without photograph) | Reference/sort code/account number | | | | | Certified copy attached? (2) |
|--|------------------------------------|--|---------------------------|--|----------------|------------------------------|
| State Pension or Benefits Book/ notification letter | | Issuing Authority | | | Date of Issue | |
| Sub-contractors Certificate (2) | | Issuing Authority | | | Date of Issue | |
| Inland Revenue tax notification | | Type: Tax assessment/Statement of Account / Notice of Coding (3) | | | Date of Issue | |
| Current Full UK Driving Licence (old style) | | | | | Date of Issue | |
| Current Local Authority Tax bill | | Name of Authority | Address current/previous* | | Date of Issue | |
| Local Authority rent card or tenancy agreement | | Name of Authority | Address current/previous* | | Date of Issue | |
| Electoral roll check (5) | | | | | Date of Check | |
| Secondary Document(non Government issued) | | | | | | |
| Home Visit | | | Premises Entered? Y/N | | Date of Visit | 14/1/14 |
| Solicitor letter confirming completion of house purchase or land registration (4) | | | | | Date of letter | |
| Most Recent Mortgage Statement | | Name of Lender | Address current/previous* | | Date of issue | |
| Bank/building society/credit union statement | | Name of Issuer | Address current/previous* | | Date of Issue | |
| House or motor insurance certificate | | Name of Issuer | Address current/previous* | | Date of Issue | |
| Utility Bill (not mobile phone) | | Name of Utility | Address current/previous* | | Date of Issuer | |

*delete as applicable

What is the client's source of wealth? (eg inheritance, divorce settlement, property sale etc)

Notes Other forms of evidence may be accepted by some providers, if in doubt please enquire.

- (1) If attaching certified copies of the evidence please also record the relevant details on this sheet as this will help with record keeping in the event that copy documents become detached from the certificate.
- (2) For self-employed persons in the construction industry – tax exemption certificate with photograph (C1S4 and C1S6)
- (3) Please delete as appropriate. Please note that a P45 or P60 issued by an employer are not acceptable for this purpose.
- (4) You must submit a certified copy of the search if you are relying on this as evidence
- (5) The previous address should also be verified if the applicant has been at the current address for less than 3 months