**Strategic Fit Questionnaire**

**Entity name:** *Insert text here*

**Date:** *Insert text here*

* 1. **Declaration**

I declare that:

* I have the authority to make this application.
* All the information given in this application form (including any attachments) is, to the best of my knowledge and belief and after having made all reasonable inquiries, true and complete.
* If at any time after making this declaration, I become aware of a material change in any information given in this application form (including any attachment) that is reasonably likely to be relevant to the Astana Financial Services Authority consideration of this application, I will inform the Astana Financial Services Authority in writing about the change without delay.
  1. **Consent**

I acknowledge that it may be necessary for the Astana Financial Services Authority to obtain information from other regulators, law enforcement agencies or other persons (whether in the State or elsewhere) to properly consider and decide this application. Accordingly, I consent to the Astana Financial Services Authority obtaining any information from third parties that the Astana Financial Services Authority considers is necessary for the purpose of considering and deciding this application.

All Personal Data provided to the Astana Financial Services Authority will be processed in accordance with the AIFC Data Protection Regulations 2017, and by signing this form I consent to the Astana Financial Services Authority sharing the information with the AIFC Authority.

**IMPORTANT**

It is a contravention of Section 104 of the AIFC Financial Services Framework Regulations to provide information which is false, misleading or deceptive to the AFSA, or conceal information where the concealment of such information is likely to mislead or deceive the AFSA. Contravention is punishable by a fine.

Full name of an authorised person:

|  |
| --- |
| *Insert text here* |

Relation to an entity:

|  |
| --- |
| *Insert text here* |

***Signature: \_\_\_\_\_\_\_\_\_\_ Date:*** *Insert text here*

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| --- |
| **Section 1. Business activities** |

1. **The proposed business activities of the Applicant are in the field of:**

**Government related 󠄀  Oil and gas  Mining 󠄀  Financial**

**Industrial manufacturing 󠄀**  **Cyber security  Education  Agriculture 󠄀**

**IT 󠄀  R&D  Culture  Health**

**Other\_\_\_\_\_\_\_\_\_\_(***please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Are the proposed business activities of the Applicant related to activities currently targeted by sanctions administered by any government or international organisations?**

**Yes 󠄀  No**

*If YES, please provide an overview below, inlcuding the sanctioned party’s name, location, sanctioned regime targeting them, connection to the company, whether any sanctions licence or legal advice is relied upon for continuing the connection.*

|  |
| --- |
| *Insert text here* |

1. **Please specify the main purpose and rationale of the Applicant's recognition in Kazakhstan and AIFC.**

|  |
| --- |
| *Insert text here* |

1. **Does the proposed business activities involve cooperation with Kazakhstani local business?**

**Yes 󠄀  No**

*If NO, please provide an overview below on a target market.*

|  |
| --- |
| *Insert text here* |

1. **What currency does the Applicant plan to operate in (multiple choice available)?**

**KZT 󠄀  RUB  USD  EUR**

**Other\_\_\_***(please specify***)\_\_\_\_\_\_**

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| **Section 2. Sanctions Exposure** |

1. **Is the Applicant or are any of the Applicant’s Connected Parties or Other Related Parties currently targeted by sanctions administered by any government or international organisations?**

**Yes 󠄀  No**

*If YES, please provide an overview below, inlcuding the sanctioned party’s name, location, sanctioned regime targeting them, connection to the company, whether any sanctions licence or legal advice is relied upon for continuing the connection.*

|  |
| --- |
| *Insert text here* |

1. **Does the Applicant, or any of the Applicant’s Connected Parties or Other Related Parties, have any offices, transactions, investments, activities or planned activities in jurisdictions currently targeted by sanctions administered by any government or international organisations?**

**Yes 󠄀  No**

*If YES, please provide an overview below, inlcuding the sanctioned party’s name, location, sanctioned regime targeting them, connection to the company, whether any sanctions licence or legal advice is relied upon for continuing the connection, details of how transactions are made, activities carried on or planned to be carried on between the company and sanctioned party.*

|  |
| --- |
| *Insert text here* |

1. **Does the Applicant, or any of the Applicant’s Connected Parties or Other Related Parties, have any transactions, investments, activities or planned activities with (or in):**

* **any person, including individual, or entity located in jurisdictions currently targeted by sanctions administered by any government or international organisations?**

**Yes 󠄀  No**

*If YES, please provide an overview below, inlcuding the sanctioned party’s name, location, sanctioned regime targeting them, connection to the company, whether any sanctions licence or legal advice is relied upon for continuing the connection, details of how transactions are made, activities carried on or planned to be carried on between the company and sanctioned party.*

|  |
| --- |
| *Insert text here* |

* **any entity owned or controlled by any individual or entity located in jurisdictions currently targeted by sanctions administered by any government or international organisations? 󠄀**

**Yes 󠄀  No**

*If YES, please provide an overview below, inlcuding the sanctioned party’s name, location, sanctioned regime targeting them, connection to the company, whether any sanctions licence or legal advice is relied upon for continuing the connection.*

|  |
| --- |
| *Insert text here* |

1. **Does the Applicant plan to take any practical steps to achieve sufficient awareness of the individuals and organisations the Applicant cooperate with, and that they do not fall under the sanctions administered by any government or international organisations?**

**Yes 󠄀  No**

*If YES, please provide an overview below.*

|  |
| --- |
| *Insert text here* |

1. **Does the Applicant plan to have any internal oversight and verification controls to mitigate the sanctions risk exposure?**

**☐ Yes 󠄀 ☐ No**

*If YES, please provide an overview below*

|  |
| --- |
| *Insert text here* |