**Details on Beneficial Ownership**

**Name of a Company to be established: *Insert text here***

 **Application Date: *Insert text here***

**IMPORTANT INFORMATION**

|  |
| --- |
| This form must be completed by each shareholder who is a body corporate. |

|  |
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| **Note:** Within the structure of companies, it is the ultimate individual who enjoys benefits of owning the company’s shares. In other words, it is an individual who enjoys the benefits of ownership even though title to the ownership is in another name. For example, there is an intermediary company in which name shares are issued. Even though the shares are issued in that company’s name, the true beneficial owner of the shares, for safety/convenience or privacy, is the individual. Also, any individual that either directly or indirectly has the power to vote or influence the decisions within the company through beneficial ownership of the shares, is the beneficial owner of that company. |

**SECTION 1**

# **BENEFICIAL OWNER**

|  |
| --- |
| **Company Details** |
| Registration Number | *Insert text here* |
| Company Name  | *Insert text here* |
| Shareholder’s Name | *Insert text here* |

**Public/Listed Company (if applicable***)*

|  |
| --- |
| **Details of Public/Listed Company***Provide the details of the beneficial owner who is a public/listed entity (if applicable).* |
| Beneficial Owner Name | *Insert text here* |
| Website Address where accounts can be found | *Insert text here* |
| Exchange where company is listed | *Insert text here* |
| Exchange Listing ID | *Insert text here* |
| Activity | *Insert text here* |
| **Registered Office Address***Provide the Registered office address.* |
| Address | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Postcode  | *Insert text here* |
| Country | *Insert text here* |

**Annex 2**

**Details on Beneficial Ownership**

**Private (if applicable)**

|  |
| --- |
| **Indicate the current state of Company’s Articles of Association** |
| Do any of the beneficial owners hold more than 25% of the shares or voting rights of the company or have control on person who hold more than 25% of the shares or voting rights or?[ ]  *Yes*[ ]  *No*  |

|  |
| --- |
| **If you answered ‘no’ to the above statement, please provide us your declaration by confirming the below statement. Succeeding questions in this section are not applicable to you.** |
| [ ]  *I confirm that none of the beneficial owners hold more than 25% of the shares.* |

|  |
| --- |
| ***If you answered ‘yes’ to the above statement, please provide details of all beneficial owners who hold more than 25% of the company shares or voting rights of the company.******If owner are Government authority, Public listed company and Regulator, natural person that is a member of its Governing Body and Ultimate Beneficial Owner of a body corporate member of its Governing Body shall be deemed to be an Ultimate Beneficial Owner of the Relevant Person*** |

|  |
| --- |
| ***Personal Details****Provide details of beneficial owner.* |
| Title | *Inse**rt text here* |
| Forenames | *Insert text here* |
| Surname | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| Percent of Shares  |  |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

|  |
| --- |
| ***Personal Details****Provide details of beneficial owner.* |
| Title | *Inse**rt text here* |
| Forenames | *Insert text here* |
| Surname | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| Percent of Shares  |  |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

|  |
| --- |
| ***Personal Details****Provide details of beneficial owner.* |
| Title | *Inse**rt text here* |
| Forenames | *Insert text here* |
| Surname | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| Percent of Shares  |  |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

|  |
| --- |
| ***Personal Details****Provide details of beneficial owner.* |
| Title | *Inse**rt text here* |
| Forenames | *Insert text here* |
| Surname | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| Percent of Shares  |  |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

|  |
| --- |
| ***Personal Details****Provide details of beneficial owner.* |
| Title | *Inse**rt text here* |
| Forenames | *Insert text here* |
| Surname | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| Percent of Shares  |  |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

|  |
| --- |
| ***Personal Details****Provide details of beneficial owner.* |
| Title | *Inse**rt text here* |
| Forenames | *Insert text here* |
| Surname | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| Percent of Shares  |  |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

**Trust (if applicable)**

|  |
| --- |
| ***Personal Details****Provide details of trustee.* |
| Trust name | *Insert text here* |
| Title | *Insert text here* |
| Forenames | *Insert text here* |
| Surname  | *Insert text here* |
| Country of Residence | *Insert text here* |
| Nationality | *Insert text here* |
| Date of Birth | *Insert text here* |
| Business Occupation | *Insert text here* |
| **Service Address***Provide Post Box number or address at which communication may be effectively serve by postal service.* |
| Address  | *Insert text here* |
|  | *Insert text here* |
|  | *Insert text here* |
| P.O. Box Number | *Insert text here* |
| Post Code | *Insert text here* |
| Country | *Insert text here* |

**SECTION 2**

# **SIGNATURE**

|  |  |
| --- | --- |
| [ ]  | I declare that the information in this application and any attachments is true and complete as at the date of this form. |

|  |  |
| --- | --- |
| **Name** *Insert text here* | **Signature** |
| **Date** *Insert date here* |

|  |
| --- |
| Party lodging this application *Provide details of the party lodging this application.* |
| Title | *Insert text here* |
| Forenames | *Insert text here* |
| Surnames | *Insert text here* |
| Former names | *Insert text here* |
| Designation | *Insert text here* |
| Organization Name | *Insert text here* |
| Email  | *Insert text here* |
| Telephone Number | *Insert text here* |

**SECTION 3**

# **CHECKLIST**

|  |
| --- |
| **Please make sure to complete all the required fields in the form and the following supporting document(s) are attached. Incorrect or incomplete application may be returned for re‐submission.****If any documents are not in the English Language, they must be accompanied by a translation, certified to the satisfaction of the Registrar.** |

|  |
| --- |
| **Required Documents** |
| **No.** | **Requirement** | **Status** |
| 1. | Copy of passport of beneficial owner or Trustee | [ ]  |

|  |
| --- |
| **For further Information, please contact us.** |
| Telephone Number  | +77172-64-73-92 | +77172-64-72-68 |
| Email Address | registration@afsa.kz  |