

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

VALENTINE LYNN DOBBINS					
Date of Birth	7/12/47	Nationality	British	Normal Country of Residence	UK
Current Address	10 OTLEY MOUNT EAST MONTON KEIGHLEY WEST YORKSHIRE BD20 5TD			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

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

Company Stamp:

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

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.

SECRET

P

GBR

506525367

DOBBINS

VALERIE LYNN

BRITISH CITIZEN

07 DEC / DEC 47

FLEEDS

28 MAY / MAI 12

IPS

28 SEP / SEPT 22

P<GBRDOBBINS<<VALERIE<LYNN

I certify that I have seen
the original document and
this is a true copy

Mr. Johnson
Managing Partner
14/1/14.

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

THE ORIGINAL DOCUMENT
HAS BEEN DESTROYED
DATE 10/10/2001

10/10/2001

THE ORIGINAL DOCUMENT
HAS BEEN DESTROYED
DATE 10/10/2001

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

JOHN ANTHONY DOBBINS					
Date of Birth	9/3/47	Nationality	BRITISH	Normal Country of Residence	UK
Current Address	10 OTLEY MOUNT EAST MONTON KEIGHLEY WEST YORKSHIRE BD20 5TD		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;



exceeds the standard evidence (written details of the further verifications evidence taken are attached to this confirmation)

Tick




Section B

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

Tick



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	505505344	Issuing Authority/ Country	IPS	Place of Birth	LEEDS	Date of Birth	9/3/47	Date of Expiry	28/7/22	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.

● 2006年10月1日起，凡在境内销售货物或提供应税劳务、服务的企业，其开具的增值税专用发票，必须通过增值税防伪税控系统开具。

P

GBR

10-10-68

505505344

DOBBINS

JOHN ANTHONY

BRITISH CITIZEN

09 MAR /MARS 47

LEEDS

28 MAY /MAI 12 IPS

28 SEP / SEPT 22

P<GBRDOBBINS<<JOHN<ANTHONY<<<<<<<<<<<<<<<<<<<<
02650571 / 7098 / 203099M>209287 I cer <<<<<<<<<<<<<04

I certify that I have seen
the original document and
this is a true copy

12 JOHNSON
MANAGING PARTNER
14/1/14

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