

Identity Verification Certificate - private individual

Introduction by PRA authorised and FCA and PRA regulated firm

1. DET	AILS OF INDIVIDUAL (see explanatory not	tes below)				
First Name	PAUL	Middle Name	MICHAEL			
Surname	RICHER	Date of Birth	15/04/52			
Address	9 FAIRMOLME CLOSE,	Previous address	s if the individual has changed address in the last three months:			
Postcode	N3 3EE					
2 001	VEIRMATION					
 in providing this Identity Verification Certificate, I/We consent to Metro Bank relying on the customer due diligence undertaken in accordance with Regulation 17 of the Money Laundering Regulations; original cocumentary evidence was seen; the evidence I/we obtained to verify the identity of the customer: (tick only one) meets the standard customer due diligence requirements set out in the Money Laundering Regulations and supporting JMLSG Guidance; or exceeds the standard customer due diligence requirements (written details of the further verification evidence taken are attached to this confirmation). 						
3. DET	AILS OF INTRODUCING FIRM (or sole trace	der)				
Full Name of Regulated Firm SAPPUIRE PINANCIAL SOLUTIONS						
Signed for and on behalf of aforementioned Regulated Firm Position Position Position Position Financial Services Register Number Name Name Name						
4. EXPLANATORY NOTES						
1 A separate confirmation must be completed for each austanes (a print bold as a first bold as						

- A separate confirmation must be completed for each customer (e.g. joint holders, trustee cases and joint life cases). Where a third party
 is involved, e.g. a payer of contributions who is different from the customer, the identity of that person must be verified, and a confirmation
 provided
- 2. This form cannot be used to verify the identity of any customer that falls into one of the following categories:
 - those who are exempt from verification as being an existing client of the introducing firm prior to the introduction of the requirement for such verification;
 - · those who have been subject to simplified due diligence under the Money Laundering Regulations; or
- those whose identity has been verified using the source of funds as evidence.



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1. DET	AILS OF INDIVIDUAL (see explanatory no	otes below)				
First Name	ROSALIND	Middle Name	MIRIAM			
Surname	ALTMANN	Date of Birth	08/04/56.			
Address	9 FAIRHOLME CLOSE, FONDON	Previous address	s if the individual has changed address in the last three months:			
Postcode	N3 3EE					
2. COI	NFIRMATION					
original c the evide (tick only meet exce confi	ulation 17 of the Money Laundering Regulations; ocumentary evidence was seen; nce I/we obtained to verify the identity of the customer: one) s the standard customer due diligence requirements set out eds the standard customer due diligence requirements (writemation). AILS OF INTRODUCING FIRM (or sole tra	ten details of the fu				
Full Name of Regulated Firm SAPPUICE PINANCIAL SOLUTIONS Financial Services Register Number 524 292 Signed for and on behalf of aforementioned Regulated Firm Position Position Date 15/09/16						

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 - · those who have been subject to simplified due diligence under the Money Laundering Regulations; or
 - those whose identity has been verified using the source of funds as evidence.