



Vanuatu Financial Intelligence Unit

COMPLIANCE REPORT

Pursuant to section 31 of the Anti-Money Laundering & Counter-Terrorism Financing Act No. 13 of 2014, persons carrying on a business stipulated under section 2 of the said Act are required to complete and submit this report to the Director.

Division 1 – COMPLIANCE DIRECTION

Part A – AML&CTF compliance issue (identified by VFIU):

1.
2.

Part B – AML&CTF Compliance Direction (issued by VFIU):

1.
2.

Part C – Timeframe by which Compliance Direction be achieved (set by VFIU):

1.
2.

Part D – Compliance Direction Implementation – Completion Update

1.
2.

Part E – Compliance Direction Implementation – Action Plan

1.
2.

Part F – Completion Direction Implementation – Anticipated timeframe of completion

1.
2.

Part G – Reporting Entity Sign Off

Name of authorised Person	
Title/Position	
Name of Reporting Entity	
Address	

Date:

Signature:

DIVISION 2 - BUSINESS DETAIL

Part A - OPERATION

Business's legal name and Head Office address:

Type of services offered (bank, casino, CTSP etc...):

Contact information:

Business telephone:

Business fax:

E-mail:

A.1 Does your business have branches, other than the head office, operating in Vanuatu?

A.2 If you answered yes to A1, please list the locations of the branches (include address, town, province, etc.). If there is not enough space below, attach a separate sheet to provide all the relevant information. Make sure to indicate that this information belongs in answer A2

A.3 Does your business have branches outside Vanuatu?

A.4 If you answered yes to question A3, please list the other countries where the branches are located. If there is not enough space below, attach a separate

sheet to provide all the relevant information. Make sure to indicate that this information belongs in answer A4

A.5 Does your business have its parent organization outside of Vanuatu?

A.6 If you answered yes to A5, please list the name(s) and location(s) (include address) of the parent body(s) outside of Vanuatu. If there is not enough space below, attach a separate sheet to provide all the relevant information. Make sure to indicate that this information belongs in answer A6.

A.7 Is your business a subsidiary of any other entity subject to the AML&CTF Act or equivalent AML/CFT laws (if the parent organization is in a foreign jurisdiction)? If so, please provide the title of these AML/CFT laws (foreign jurisdiction)?

A.8 Does your business own any other entities that are subject to the AML&CTF Act? If so, what are the name and address of these entities? If there is not enough space here, attach a separate sheet to provide all the relevant information. Make sure to indicate that this information belongs in answer A8.

A.9 Are you an agent of any other business (as captured under section 2 of the AML&CTF Act)?

A.10 If you answered yes to question A9, please list the name(s) of the business(s) you are an agent for? If there is not enough space below, attach a separate sheet to provide all the relevant information. Make sure to indicate that this information belongs in answer A10.

A.11 How many employees (staff, contractors, casual, permanent) are there in your business (at time of form completion)

Part B - TRANSACTIONAL

B.1 For the previous fiscal year, please indicate the approximate annual value of operational asset, liabilities, owner's equity, profit/turnover the business conducted. Submit with a copy of the audited financial report for the last 3 financial year

B.2 For the same previous fiscal year, please indicate the approximate value of all deposits received by your business from customers and payouts to customers (in line with each type of service you offered).

B.3 What is the average size of these transactions – customer deposits and withdrawal?

B.4 What is your business's primary bank?

B.5 What is your business's secondary bank?

B.6 Mode of customer payments (deposit, transfer etc...) made to the business e.g. bank account deposit/transfer, cash/cheque acceptance

B.7 Mode of business payments made to the customer e.g. cash/cheque, account transfer, transfer of value to other services provided by same business etc...

B.8 Please provide a copy of your business' Business Name Certificate, Business Licence/Registration Certificate, Annual Returns (for previous 3 financial years) etc...

Part C – REPORTING ENTITY DETAIL

Name of authorised Person	
Title/Position	
Name of Reporting Entity	
Address	

Date:

Signature: