

CLASSIFIED

<p><b>Vanuatu</b></p> <p><b>Financial</b></p> <p><b>Intelligence</b></p> <p><b>Unit</b></p>		<p>Application</p>
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**SANCTIONS SECRETARIAT**

**Application for Certificate of Acknowledgement of False Positive Identification under the  
*United Nations Financial Sanctions Act No. 6 of 2017***

The following information is required in order to assess your application for a Certificate of Acknowledgement of False Positive Identification under the *United Nations Financial Sanctions Act No. 6 of 2017* (the Act). The information you give may be disclosed in accordance with section 28 of the Act.

**Details of Applicant**

Applicant/Company Name:		<input style="width: 100%;" type="text"/>	
Applicant's Postal Address:	Applicant's Permanent Address (if different):	<input style="width: 100%; height: 80px;" type="text"/>	<input style="width: 100%; height: 80px;" type="text"/>
Contact Person's Name:			
<input style="width: 100%;" type="text"/>			
Telephone No.:		Facsimile No.:	
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
E-mail Address:		Mobile No.:	
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	

Applicant's relationship to designated person (if not designated person themselves):

**Section A Details of the owner or controller of the property**

The identity of the designated person/entity who owns/controls the property:

**Section B Details of the property**

Describe the frozen property of the person making the request:

**Section C Reasons why the person or entity in section A is not a designated person or entity**

*Please attach any documentation providing evidence that the person to whom this application relates is not a designated person or entity.*

### Declaration by Applicant

*Warning: a person who makes a declaration that is false in a material particular is guilty of a misdemeanour under the Criminal Code Act 1974 and a penalty of imprisonment for up to three years may apply*

I hereby declare that the details provided in this application are true and correct.	
_____ <i>Name</i>	_____ <i>Occupation</i>
_____ <i>Signature</i>	_____ <i>Date</i>

### Certificate regarding Applicant

*Applicants need a person who has known them personally for at least 3 years to declare that the statement they have made is true. This declaration must be witnessed by a Notary Public. Warning: a person who makes a declaration that is false in a material particular is guilty of a misdemeanour under the Criminal Code Act 1974 and a penalty of imprisonment for up to three years may apply. A Notary Public who wilfully certifies or propounds any false statement or document or who fraudulently with intent to deceive, withholds or perverts any fact or document pertinent to the subject of protest or any other notarial act shall be guilty of an offence under the Notaries Public Act 1988 and shall be liable to imprisonment for a term not exceeding 2 years.*

I hereby declare that I have known personally the Applicant for a period of more than 3 years and that the statement made by the Applicant in this form is true to the best of my knowledge and belief. No fee has been charged for this certificate.	
_____ <i>Name</i>	_____ <i>Occupation</i>
_____ <i>Address</i>	
_____ <i>Telephone/Mobile</i>	_____ <i>Applicant's Name</i>

<i>Signature</i>	<i>Date</i>
<i>Witness name</i>	<i>Witness occupation</i>
<i>Signature</i>	<i>Date</i>

**Office Use Only**

<p>Date received: Application number: Required fields: Fields yet to complete: Processing officer: Employment number:</p>
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