

CLIENT DUE DILIGENCE FORM ("CDD FORM") FOR LEGAL PROFESSIONALS NATURAL PERSONS

Revised: June 2023

This CDD Form is designed to provide Members with examples and practical applications showing how the CDD, including client risk assessment requirements contained in the Practice Direction P ("PDP") and the Guideline on Anti-Money Laundering and Counter-Financing of Terrorism Ordinance (Cap. 615) ("AMLO"), may be met by legal practitioners. In particular, legal practitioners must have established adequate CDD procedures, including client and matter level risk assessment to identify and manage risks associated with Money Laundering ("ML"), Terrorist Financing ("TF") and Proliferation Financing ("PF"). Therefore, this form was designed to serve as a practical example of how the client risk assessment could be undertaken and documented.

The CDD Form is a learning tool only and it is not a prescribed requirement or a formal guideline. In particular, as there are different ways to meet the PDP and AMLO requirements, the examples stated in the CDD Form may differ from the existing practices of law firms, especially those with an established AML framework. As such, the CDD Form is not intended to compel, suggest or advise changes to those existing practices.

The CDD Form is designed to produce an AML risk rating score based on a number of factors that would assist legal practitioners with classifying clients as Low / Medium / High to understand what level of CDD is required to be applied (Simplified/Standard/Enhanced). When weighting risk factors, legal practitioners should take a holistic approach and make an informed judgement about the relevance of different risk factors in the context of a particular client relationship or occasional matter. The weight given to each factor is likely to vary across practices, clients and matters, the high-risk triggers included in the CDD Form are not exhaustive and legal practitioners should consider all individual AML risks applicable to each client or matter. There is no prescribed approach to conducting client risk assessments, however they must be written down, monitored and refreshed depending on the client's risk rating categorization to reflect changing risks or information about the client.

| Client Name: | | | | Date of Record: | |
|------------------------------|--|------------------|------------|-----------------|----------|
| Subject Matter: | | | | Matter No: | |
| New Client: | ☐ Yes ☐ No | Existing Client: | ☐ Yes ☐ No | | ' |
| | Previous AML Risk Rating: (Legal practitioners should at least keep a clear record of clients rated as High-risk or to whom Enhanced Due Diligence measures were applied). | | | Medium 🗌 Low | |
| For Existing Clients ONLY | Was the CDD information refreshed from the date of last client screening or service provided? (Frequency of client screening (on-going monitoring) is subject to risk-based approach adopted by the legal practitioner). Note: For existing clients who have not been in contact with the Practice for a significant period of time (anything above a year may be considered a significant gap in relation to those clients or transactions assessed as higher-risk), you should consider refreshing the CDD information. The CDD information must be always refreshed/reviewed when a transaction / new client matter is: (a) by virtue of the amount or nature of the transaction, unusual or suspicious; or (a) not consistent with the legal professional's knowledge of the client or the client's business or risk profile, or client's source of funds. | | | □ Ye | es □ No* |
| | Date of the last CDD refresh / on-going monitoring and action taken: To check whether: transaction(s) (including new services/instructions) are consistent with the client's information; client CDD data, documents and information are relevant and kept up-to-date. If CDD refresh not required, specify the reason: | | | | ation; |

*Note: If not, please contact the client to verify if there are any changes to the client's information or circumstances initially provided. Based on the information obtained from the client, conduct client screening (if required). After completion, please attach the review result in the client file.



| Intermediaries | Did you rely on the client's information and verification condro of the specified intermediaries as defined in Section 18, Div 2 of Schedule 2 to the AMLO? For example: an oversees office of your firm; an accounting professional; a notary public; a tax advisor; an estate agent; other legal professional/law firm; a TCSP licensee; a financial institution that is an authorized institution; a licensed corporation; an authorized insurer; a licensed individual insurance agent; or a licensed insurance agency or licensed insurance brok Note: You can rely on the Know Your Customer (KYC) wor by the above intermediaries only if: (a) it is registered, licensed or regulated under the loc jurisdiction that is a member of the Financial Action (FATF); (b) it has measures in place to ensure compliance with the requirements similar to those imposed under the AMLO (c) it is supervised for compliance with those requirem authority in that jurisdiction that performs functions sim of any of the relevant authorities in Hong Kong or the of Hong Kong. | Part □ Yes* □ No □ Yes* □ No Yes* □ No |
|----------------|--|---|
| Details of | Name of Intermediary: | Country of Incorporation / Residence (if individual): |
| Intermediary | Intermediary is a Legal Professional / Auditor / Financial Ins Details of Others: | itution / Others *(Select where applicable) |
| | | |

*Note: If yes, you must obtain copies of the client identification and verification documents from the specified intermediary and keep as a record in the client file. Where the intermediary is an overseas office of the firm, you must in all circumstances obtain client's ID information, and have an access to copies of other client identification and verification documents upon request.

| PART A (1): Client Identification for Natural Person - Applicable to all clients | | | | |
|--|------------------------|--|--|--|
| English Name: | Chinese Name (if any): | | ate of Birth: | |
| ID Card / Passport: | Nationality: | | ccupation / Business Nature: | |
| Contact No.: | Email Address: | | ax No.: | |
| Residential Address: | | Document(s) obtained to verify proof of address: Utility bill Bank Statement Letter from a governmental body Other: | | |
| Passport issued by a s | | y a sovereign autho ereign authority | ority showing Nationality ssport issued by a sovereign authority | |

Information required for transactions falling within the definition of "Applicable Circumstance":

- · Financial transactions such as buying and selling of real estate, business, company, securities and other assets and property
- Managing client money, securities or other assets
- Management of bank, savings or securities accounts
- The formation, structure, re-organisation, operation or management of companies and other entities and legal arrangements
- Insolvency cases and tax advice
- Other transactions involving custody of funds by law firms as stakeholder or escrow agent or transfers of funds through their bank accounts

Nature and purpose of the transaction / legal service:

(Details of parties to the transaction and their business relationship with the client (explain which party will transfer/receive funds and which party will cover legal fees). Where funds are expected to be received from a Third-Party on behalf of the client, explain why and the source of funds)



| | | | - Miles | |
|---|--|---------------|---|-------------------------|
| Note: You must understand: the account from which the funds were transferred (Client's/Third-Party bank account, foreign bank located in a highrisk jurisdiction, HK bank); and the activity that was involved in generating/accumulating those funds. You should seek evidence in a higher-risk scenario and when the SoF is unclear. | Where did the funds originated from (from which bank account and jurisdiction (Client's or a Third-Party)? Please specify | | What activity generated Employment Incom Sale of real estate of Inheritance Share sales/divider Pension release Loan Drawdown Business income Rental Income Savings Gift Sale of Asset(s) Gambling winnings Compensation Others: | ne / business nds |
| PART A (2): Particulars of Individual Purpo | orting to Act on Behalf o | of The Client | | |
| English Name: | Chinese Name (if any): | | Date of Birth: | |
| ID Card / Passport No.: | Nationality: | | Acting capacity: | |
| Contact No.: | Email Address: | | Fax No.: | |
| Residential Address: | Correspondence Ade | | dress (if different): | |
| The following documents were obtained to verify whether the individual (intermediary, agent, representative) is authorized to act on behalf of the client: | A Board Resolution or similar written authority (e.g. list of authorised signatories) authorising the person to give instructions Power of Attorney Letter of Appointment Estates: Death certificate Grant of probate or Letter of Administration (if applicable) Written confirmation from the client Confirmation from a trustee acting in a professional capacity Confirmation from a trust company managing the trust Other: | | | |
| The following identity documents were obtained to verify the identity of the intermediary, agent, representative: | Hong Kong Permanent ID Card National ID Card issued by a sovereign authority showing Nationality Passport issued by a sovereign authority Non-Permanent Hong Kong ID card and Passport issued by a sovereign authority Other: | | | |
| Note: Subject to risk-based approach, you ma | , | <u> </u> | | |

PART A (3): VERIFICATION OF CLIENT'S INFORMATION – applies to "Applicable Circumstances" only

Methods of verification:

Face-to-Face - The original identity document must be presented to the legal practitioner and a copy of that document should be made during the Face-to-Face meeting with the practitioner before accepting instructions. If copies are provided, originals should be sighted as soon as practicable after accepting the instructions, if it is necessary not to interrupt the normal conduct of business and any risk of ML/TF/PF after accepting instructions is effectively managed.

Non-Face-to-Face – Where it has not been possible to verify the documents in a face to face meeting, the client can:

- (a) Provide certified copies of the documents, with the certification completed by acceptable identity agent. An acceptable certified document is one that is certified by:
 - a Notary Public
 - a Legal Practitioner
 - a Certified Public Accountant (practising)
 - a Chartered Secretary
 - a Justice of Peace
 - a Consular or Embassy officer of the client's home country
- (b) If certified document cannot be obtained, you should attempt to verify the identity of the client by alternative means, for example through a credit reference agency, information service or government-issued correspondence.



Electronic verification - Where it has not been possible to verify the documents via an acceptable identity agent you can either:

- (a) Use client identity verification software which allows you to undertake client checks remotely and securely, making it easier to maintain records for audit. The third-party solution should be a reliable, independent system with appropriate built-in information security protocols which will help mitigate fraud risks, and should include technology elements such as: (i) authentication of identity documents (HK ID card or passport); (ii) facial recognition; and (iii) liveness detection. Firms may also use "digital identification system" recognized by the Law Society e.g. the iAM Smart.
- (b) Use video conferencing tools (such as Skype, Zoom or FaceTime, WhatsApp or WeChat) to undertake manual identification and verification, the following procedure can be considered:
 - Request that the client sends you a clear image of their passport / ID document using a suitably secure means, such as encrypted email;
 - Arrange to video call the client. During this call, ask the client to hold the passport / ID document to their face. By
 checking the digital copy along and comparing the image of the client with the passport / ID document, you should
 be satisfied that they are one and the same before proceeding;
 - Capture screenshot of the client holding his passport / ID document to their face, you should date and attach a copy
 of that screenshot, including a copy of the client's passport / ID document initially provided, in the client file; or
 - You can require a client to provide a clear, front-view 'selfie' of themselves that can be compared with the scanned
 or photographed copies of identification documents. Call the client to ask questions about their identification, their
 reason for requesting the service or other questions that would assist in ascertaining whether the client is who they
 claim to be:
 - In addition to the passport / ID document, ask the client to provide you with a digital copy of their valid proof(s) of address; and
 - Ensure that you document the rationale for adopting your revised identification and verification measures in Part B: Risk Assessment and to risk grade the relationship accordingly.

Please refer to Alternative Processes to Verify a Client's Identity guide for further examples.

| PART B: Risk Assessment | | |
|---|------------------------------|------------------------------|
| Is the client's or representative's name listed on the sanctions, terrorist or terrorist associates lists? https://www.cedb.gov.hk/citb/en/policies/united-nations-security-council-sanctions.html https://www.un.org/securitycouncil/content/un-sc-consolidated-list https://www.un.org/securitycouncil/content/un-sc-consolidated-list https://www.un.org/securitycouncil/content/un-sc-consolidated-list https://www.un.org/securitycouncil/content/un-sc-consolidated-list Note: If yes, please complete Part G directly Attach all documents on screening and searches performed (if any) in the client file. | Prohibited relationship | |
| Is the client or representative a Politically Exposed Person ("PEP")? | | |
| *After completion of the client risk assessment, consideration should be given to determine the level of Enhanced Client Due Diligence. In the case of a "HK-PEP" and an "International Organisation PEP", the suggested rating may be reduced if the PEP poses a low risk taking into account the risk factors set out in para 121 of the PDP. | ☐ Yes (15)* | □ No (0) |
| Note: If yes, please complete Part E, F and G Is the client or representative from, or residing in, a High-Risk jurisdiction or jurisdiction with | | |
| strategic AML / CTF deficiencies identified by FATF? Note: List of FATF's country risk ratings can be accessed here: https://www.fatf-gafi.org/publications/high-risk-and-other-monitored-jurisdictions/ https://www.knowyourcountry.com/copy-of-country-reports List of High-Risk jurisdictions identified by the United Nations Security Council: United Nations Security Council Sanctions - Commerce and Economic Development Bureau (cedb.gov.hk) Other resources to help in identifying High-Risk jurisdictions: Basel AML Index Basel AML Index Basel Institute on Governance (baselgovernance.org) Corporate Tax Haven Index 2021 ranking (taxjustice.net) Corruption Perception Index Corruption Perceptions Index - Explore the Transparency.org *If the client is from or resides in a High-Risk jurisdiction and there are other risk factors present, please complete Part F and G. Note: The fact that the client is linked to a High-risk jurisdiction does not mean, the client is suspicious or you should turn the client away. It means the risks of ML / TF are higher and you should apply adequate checks to mitigate those risks. | □ High Risk Country (15)* | ☐ Medium Risk Country (4) |
| Non-Face-to-Face client identification? (Suggested rating can be reduced if there are legitimate reasons for not being able to meet the client considering any geographic/jurisdictional risks this may present). Rationale: Note: Please ensure that at least the first payment to the client account is carried out through an account opened in the client's name with a Hong Kong bank or an institution that is incorporated or established in the jurisdiction that is a compliant member of the FATF. | □ Yes (15) | □ No (0) |



| | | 音 港 | 津 町 | Y |
|--|--|-----|-----------------------|----|
| Does the client intend to use a Third-Party bank account or cash for transactional purposes? Rationale: | | | | |
| Note : Appropriate checks should be made and the rationale for any payments into client account by the Third-Party is clearly understood before any such payments are accepted. You should seek identification document(s) and enquiry into sources of funding from that Third-Party and be alerted to warning signs. | ☐ Yes (15) | | □ No (0) | |
| You should consider establishing a policy of never accepting cash payments. If this is unavoidable, you could set a limit above which you will not accept cash payments or should considerer cash payments as a high risk particularly where large in size. | | | | |
| PART C: NATURE OF CLIENT'S OCCUPATION / BUSINESS | | | | |
| The client owns more than 25% of shares, is a partner, director, authorized signatory, senior executive controller in any of the higher-risk sectors listed below: | cutive or financial | | | |
| Charity, Foundation, Non-profit organisation, Non-governmental organisation that exhibit characteristics Third Party Payment Processors (TPPPs), Money Service Business (MBS) (companies of involving money/currency, money transfer, cheque cashing, and issuing or selling travelers che Government or State-Owned Bodies that exhibit high risk characteristics High Value Products – Dealers/traders in precious metals, gems, jewelry, or art & antiques Cash Intensive – Money changer, Pawnshop, Privately owned ATMs/teller machines, Vendin operators, Restaurants, Bars, Parking garages, Beauty/Hair Salons, Massage parlor, Taxi and drivers Entertainment – Casinos, Karaoke, Night clubs, Pubs, Gambling operators Business Services – Fund Manager, Custodian, Trustee, Unlicensed Money Lenders, Compagents Agency Services – Dealers, Traders, Brokers, Developers of Real Estate, Travel agents/Tou Transportation of goods - Import / Export traders, Freight forwarders, Freight shipping comp Equipment rental and manufacturing related to transport, Charterers or operators of ships / vel Couriers Potential exposure to criminal activities – Tobacco wholesalers, Sex industry establishmen Construction companies, Telephone card/phone centers, Mining business, Pharmaceutical colonatruction companies, Telephone card/phone centers, Mining business, Pharmaceutical colonatruction companies, Telephone card/phone centers, Wining business, Pharmaceutical colonatruction companies, Pharmaceutical colonatruction companies, Telephone card/phone centers, Wining business, Pharmaceutical col | fering services eque) g machine I limousine any formation r organizers anies, hicles / aircraft, hts, Real estate, | | High (5) | |
| Does the employment status of the client fall into one of the following categories? Note: You should clearly understand and verify client's SoF and Source of Wealth (SoW) (if recircumstances to ensure funds do not come from an illegitimate source. | equired) in those | M | edium (3 | 3) |
| ☐ Unemployed ☐ Self-employed ☐ Retired person ☐ Student | | | | |
| PART D: PRODUCTS AND SERVICES | | | | |
| Is the client seeking to use your client account without delivery of legal service or is seeking an adverquiring transfer of funds but instructs you to make or receive payment(s)? | vice on matter not | | ohibited ationship | |
| Does your client seeking to engage you in any of the higher-risk services? Conveyancing Sale or Purchase of business / securities / assets or property Formation and management of trusts, companies or charities Tax advice Managing client money / securities / assets Managing bank / saving / security accounts Insolvency / Bankruptcy Acting as custody stakeholder of client's funds / escrow agent Services offered to clients in the context of trade based or trade-finance arrangements Note: You may consider setting transaction value limit for the above services and risk rate | the services as | | (5) | |
| (high/medium/low), for example property sale transactions of 10,000 000 HKD or above as a higher will vary depending on the size and type of transactions undertaken by the firm. | | | | |



| PART E: Politically Exposed Pers | son | | | | | |
|--|---|---|-------------------------------|--|--|--|
| Name of PEP: | | Title of Position Held: | | | | |
| | | | | | | |
| Name of the Governmental or International Institution / Judiciary / Military / Political Party: | | Country/Jurisdiction where the function is performed: | | | | |
| Type of PEP: | | ly Member (Spouse or Partner / Child esentative | / Parent / Child's Spouse) | | | |
| Describe the nature of the prominer has been entrusted with as a PEP, relationship with the PEP (if Client in | or the nature of the person's | | | | | |
| If "HK-PEP" or "International Organ applying EDD (if appropriate, consider the PDP): | | | | | | |
| If former PEP, reasons for not apply (if appropriate, considering factors s PDP): | | | | | | |
| PART F: Enhanced Client Due Di | ligence (EDD) | | | | | |
| EDD is required for "High-risk" clien you should: | ts i.e. those who are more likely to | be involved in ML / TF / PF activities | . When applying EDD measures, | | | |
| (b) Provide information on client's (c) Provide information on client's (d) Consider the nature of an ong (e) Obtain approval of senior man In the case of a new clier | (a) Assess all circumstances implying higher risks of ML / TF / PF in providing service(s) to your client / beneficial owner; (b) Provide information on client's SoW; (c) Provide information on client's SoF; (d) Consider the nature of an ongoing monitoring of the business relationship; and | | | | | |
| What is client's SoW? (Applies always to "Non-HK" and higher risk PEPs; and clients from a High-risk jurisdiction <u>if</u> the business relationship is assessed to be a higher risk business relationship taking into account all risk factors). | | | | | | |
| For other type of High-risk clients apply any of the following EDD approach: | | | | | | |
| seek additional independent provided or made available to take additional measures to ure ownership and financial situation the transaction to be so consistent with the purpose an relationship; or | nderstand better the background, on of the client, and other parties atisfied that the transaction is d intended nature of the business the client relationship, including | | | | | |
| Note : SoW must be documented a should be sought (if required). Yo information on: | | | | | | |
| client's net worth; andwhere that net worth came from | m / how it was generated. | | | | | |
| Note : You can rely on publicly information is available, external provided by the client, focusing on major proportion of the wealth. | confirmations and information | | | | | |
| Examples of documents supporting documents should be attached in the | | | | | | |

¹ Definition of a "Close associate" includes:

⁽a) an individual known to have joint beneficial ownership of a legal entity or a legal arrangement or any other close business relationship with a politically exposed person;

⁽b) an individual who has sole beneficial ownership of a legal entity or a legal arrangement that is known to have been set up for the benefit of a PEP.



| | T. C. |
|---|--|
| Type of SoW: | Examples of supporting document(s): |
| ☐ Employment (e.g. salary, wages, bonus, other benefits) | Copies of pay slips Bank statements displaying source of income and/or regular payments from employer Personal Tax Summaries (PTS) Confirmation from the employer of annual salary Latest accounts or tax declaration if self-employed |
| □ Rental Income | Tenancy agreement Bank statement showing regular payments of the rent by tenant |
| ☐ Loan Drawdown | Loan agreement or loan statement |
| □ Inheritance | Letter from solicitor Copy of Will / Grant of Probate |
| ☐ Sale of Assets | Sale and purchase agreement Letter from solicitor/accountant Contract Note Shareholder's certificate Transaction receipt/confirmation Title Deed |
| □ Investments | Records of external investments Audited Financial Statements Copy of contracts |
| ☐ Business ownership interests | Audited Financial Statements Copy of latest management accounts Board of Directors approval Dividend distribution Tax declaration form |
| □ Gift | Letter from a solicitor Letter from donor explaining the reason for the gift and the source of donor's wealth Identification documents of donor Donor's source of wealth |
| □ Others | Please specify here: |
| Nature of enhanced / ongoing monitoring of the business relationship (Who will do What and How often): | |
| (What are the additional actions / controls that will be/are applied to monitor this High-risk relationship?) | |
| Note: Ongoing monitoring means scrutinising transactions to check they remain: consistent with what is known about the client; controlling changes to client's information, activities and requested services; and monitoring frequently renewed sanctions, PEP lists and adverse news. | |
| The type of monitoring may include: requiring a greater level of information and explanation from the client in regards to transactions and amounts (during the course of a given instruction); greater frequency of checks on transactions, particularly SoF; or undertaking more frequent CDD checks on your client (screening, adverse news checks) periodically or upon each new matter. | |
| Overall conclusion: | |
| (If applicable, please explain if there are any additional risk factors present that should be taken into account, or reasons why the risk rating should be adjusted). | |



| PART G: Approvals of Customer Risk Assessment | Overall AML Risk Rating: |
|--|---|
| I certify that the information above is correct and accurate to the best | of my knowledge. |
| Signed by Engagement Lawyer: | Approved by Compliance Officer / Partner: |
| | |
| | |
| | |
| Name and Signature | Name and Signature |
| Date: | Date: |

ML / TF RISK RATING METHODOLOGY

| Risk Rating | Score Range | Type of Customer Due Diligence |
|-------------------------|---------------------|---|
| Low | Total Score ≦ 8 | Simplified CDD (does not require identification and verification of beneficial owner, allows for accepting other documents, data or information (e.g. proof of license, listed status or authorization status)) |
| Medium | Total Score 9 – 14 | Standard CDD |
| High | Total Score 15 – 40 | Enhanced CDD |
| Prohibited Relationship | Total Score ≥ 41 | CDD is not required. Client instruction(s) should not be accepted. |
| | | |

| Total Score: | |
|--|--|
| AML Risk Rating: Low / Medium / High / Prohibited | |

8 / 8 Page