SERVICE PROVIDERS KYC FORM

Title of the legal entity					
Commercial register number					
Tax identification number					
Field of activity					
Open Address					
Telephone number					
Fax number (if applicable)					
Email					
Website					
The person authorized to represent the legal entity					
Name-Surname					
Place and date of birth					
Nationality					
Type of identity document					
Number of the identity document					
Signature example					
If the person authorized to	represent the legal entity is a citizen of the Republic of Turkey				
Mother's name					
Father's name					
T.R. Identification number					



RECOGNITION OF THE REAL BENEFICIARY

Enter the information of the person(s) who control the company;

- Individuals who hold at least 10% or more of the voting rights or capital share.
- Those who own at least 10% or more of the voting rights or capital share with

a common agreement

Legal/Natural Person; Name & Surname Identity (TCKN/VKN) or Passport Number	Address	Voting Rights (%)	Capital Share	Date of Establishment / Date of Birth and Place of Birth

B. RECOGNITION OF THE ULTIMATE BENEFICIARY

If the person(s) who provide control of the company are legal persons, the information of both the legal person and the persons who provide the control of that legal entity must be entered. In this context, please fill in the table below.

Legal/Natural Person; Name & Surname Identity (TCKN/VKN) or Passport Number	Address	Voting Rights (%)	Capital Share (%)	Date of Establishment / Date of Birth and Place of Birth

C. REQUIRED DOCUMENTS

- Certificate of Registration
- Memorandum of Association
- Articles of Incorporation
- Shares Certificate.
- ID Copies and Proof of address (Registered address, UBO
- Board Resolution
- Tax Registration

SIGNATURE