



# Anti-money laundering and combatting the financing of terrorism (AML/CFT)

## Nomination of AML/CFT Officer

Please provide details of your business's nominated officer below.

<b>Business Name:</b>	
<b>Business address:</b>	
<b>Business Licence number:</b>	
<b>Nominated AML/CFT Officer:</b>	
<b>Nominated Officer's contact number(s):</b>	
<b>Nominated Officer's e-mail:</b>	
<b>Nominated Officer's position within the Business:</b>	
<b>Nominated Officer's experience:</b>	

Nominated on behalf of the Business by -

-----  
Director/Manager

-----  
Signature

I hereby accept my position as Nominated AML/CFT Officer for the business -

-----  
Name

-----  
Signature

