Agricultural Development Bank
Growing stronger together

POLITICALLY EXPOSED PERSON (PEP) APPROVAL FORM

Name of Politically Exposed Person (PEP's)	
Home Branch	☐ North ☐ Central ☐ East ☐ South ☐ Tobago ☐ Recoveries
Relationship to PEP	☐ Self ☐ Family Member ☐ Close Associate
Reason For PEP Status	
Occupation / Position	COMPANY DIRECTOR
Organization of Affiliation	
Purpose of Business / Transaction	☐ Loan* ☐ Savings ☐ One Off Transaction
	Other *(Please Specify)*
Source of Funds / Wealth *(Where Applicable)*	☐ Business Income ☐ Salary ☐ Other *(Please Specify)*
Details	Details
Status of Relationship with ADB	☐ New Client ☐ Existing Client

Details of existing relationship with the ADB *(loan info / savings account info, etc)*	
Media Reports / Other Sources of Adverse Reports *(Where Applicable)*	-

Known Business Interest of Client			
No.	Name of Entity	Role in Entity	Shareholding % *(Where applicable)*
1.			
2.			
3.			
4.			
5.			

Compliance Comments:

Senior Management Approval		
Prepared by: **(Branch Manager)**	**Reviewed and Approved by:** **CM Credit**	**Reviewed and Approved by:** **Compliance Officer**
Name :	Name :	Name :
Date :	Date :	Date :
Signature :	Signature :	Signature :