# cid:image001.jpg@01D31FEF.506334C0

# **Customer**

|  |
| --- |
|  |

# In the framework of our due diligence process required for becoming a shipper, please fill in this form and return this form together with the mandatory supporting documents.

As part of the Balansys customer due diligence process[[1]](#footnote-1), please fill in and return this form and its annex together with the necessary supporting documents where applicable.

It is strongly recommended that you provide as much information as possible, in English, to ease future applications.

# **Mandatory supporting documents**

Please provide the following documents in English or a certified translated version in English:

***Please tick the respective boxes*** *to indicate which documents are being provided.*

The latest commercial registry extract, not older than three months

The latest articles of association of the Company

Rating by a recognised rating agency (Standard & Poor’s, Moody’s, Fitch) if available.

*Please paste link here if applicable:*

In case the Company doesn’t hold a sufficient rating by a recognised rating agency in the framework of the creditworthiness requirements of the Agreement the Company is willing to sign, the statutory and consolidated financial statements of the last three fiscal years including management and auditor’s report. If the Company is younger, please provide all available audited annual financial statements and the opening balance of the Company and in case of an existing Parent Company, also include the latter’s financial statements of the last three fiscal years (including management and auditor reports)

If not already included in the financial statements, a memo describing Company activities. Alternatively, please complete the Main Business field in the Company Profile section below

The Powers of Attorney (PoA), or Delegation of Powers (DoP) of the person(s) who will sign this KYC Form and:

* a copy of his/her/their passport or ID (if the person(s) who will sign the contract is/are different, please also include a copy of his/her/their passport), or
* a certified copy of an original of the signature of the person(s) who will sign (the copy must be certified by a lawyer working within the Company)

If the person(s) sign(s) this form using an advanced or qualified electronic signature, it is not necessary to provide the above-mentioned copy of the passport or certified copy of the original signature

Structure chart up to and including the Ultimate Parent level as well as the direct and indirect beneficial owners with minimum of 25% aggregate ownership or comparable control rights, including all the Ultimate Beneficial Owner(s). Alternatively, please complete the Ownership section of this form

The Company’s Code of Ethics, the Company’s Anti- Bribery & Anti-Corruption policy (ABAC), and the Company’s Anti-Money Laundering (AML) and Counter-Terrorist Financing (CTF) policy. If the Company has not such policies, please provide a sworn statement in which the Company states that the Company does not tolerate or engage in any form of corruption, bribery, money laundering or terrorist financing and countersigned by a recognised auditor

*Please paste link here if applicable:*

Proof of VAT (Value Added Tax) registration, if applicable, being a VAT registration certificate, not older than three months or a link to the official Government website or European Commision website.

*Please paste link here if applicable:*

**Company profile**

In order to analyse your application, please answer thoroughly and complete all the following questions according to Commercial Registry (questions must be answered for the applicant company only – not its group or shareholder).

|  |  |  |
| --- | --- | --- |
| 1 | Company legal name |  |
| 2 | Company registered office address including country |  |
| 3 | General Company postal address if different |  |
| 4 | General Company phone including country code |  |
| 5 | General Company email |  |
| 6 | Website |  |
| 7 | Company incorporated under the laws of |  |
| 8 | Date of incorporation |  |
| 9 | City of registration |  |
| 10 | Registration number |  |
| 11 | LEI[[2]](#footnote-2) |  |
| 12 | EAN number(s)[[3]](#footnote-3) |  |
| 13 | EIC number[[4]](#footnote-4) |  |
| 14 | If applicable VAT number/TIN/DUNS[[5]](#footnote-5) (US only) in country of establishment |  |
| 15 | VAT numbers of relevant company local branches if applicable (please specify the countries) |  |
| 16 | Main bank name |  |
| 17 | Main bank address including country |  |
| 18 | Account number |  |
| 19 | IBAN number |  |
| 20 | BIC code[[6]](#footnote-6) |  |
| 21 | Number of employees |  |
| 22 | Names of the Company’s Managing Director(s)/ CEO |  |
| 23 | Please describe the core business activities of the Company [[7]](#footnote-7) |  |
| 24 | Countries in which your Company is active |  |
| 25 | Is there any business relationship and/or interest in EU-sanctioned[[8]](#footnote-8) countries? | |  |  | | --- | --- | | 1. Yes | No |   If yes, please mention the sanctioned country name |

# **Identity**

Which category does your company belong to (multiple possible answers)

1. Majority of shares publicly- /state- / municipally owned *(>50%) or 100% subsidiary of such a company*

2. Exchange listed / exchange traded corporation *or 100% subsidiary of such a company*

3. Private company

# **Ownership**

*Not necessary if this information is already provided in the supporting documents.*

*NB: Please ensure that you include all the Ultimate Beneficial Owner(s)[[9]](#footnote-9), who is (are) a natural person(s) unless the company is stock listed on an exchange, or under the supervision of a supervisory authority, or is a public authority.*

1. Who are your direct shareholders/owners owning more than 25% of your Company?

|  |  |  |  |
| --- | --- | --- | --- |
| Company/First Name and Surname | Role/position (within the Company if applicable) | Country of domiciliation | Share  (in %) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

2. Who are your indirect shareholders owning more than 25% of your Company?

|  |  |  |  |
| --- | --- | --- | --- |
| Company/First Name and Surname | Role/position (within the Company if applicable) | Country of domiciliation | Share  (in %) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# **Ethical Standards**

The Company declares that the following facts are accurate:

1. The Company applies a level of ethical behaviour and has developed ethical programs and safeguards, which are equivalent to the ethical principles, standards and behaviours presented in the Ethical Code and its Annexes of the Fluxys Group available [here](https://www.fluxys.com/-/media/project/fluxys/public/corporate/fluxyscom/documents/fluxys-group/corporate/ethical-code/the-fluxys-group-ethical-code---en.pdf).

|  |  |
| --- | --- |
| 1. Yes | No |
|  |  |

2. The Company, its directors, employees, consultants, third-party service providers, agents, and other persons acting on behalf of your Company, act in compliance with the Company’s existing ABAC, AML, CTF and other applicable policies, including applicable laws and regulations.

|  |  |
| --- | --- |
| 1. Yes | No |
|  |  |

3. The Company regularly trains or educates its staff members working in departments responsible for compliance with the relevant ABAC, AML, CTF or KYC requirements about measures/processes and (if applicable) regulatory requirements.

|  |  |
| --- | --- |
| 1. Yes | No |
|  |  |

4. The Company is located in a [high risk third country](https://finance.ec.europa.eu/financial-crime/high-risk-third-countries-and-international-context-content-anti-money-laundering-and-countering_en)[[10]](#footnote-10) in the framework of anti-money laundering and countering the financing of terrorism.

|  |  |
| --- | --- |
| 1. Yes | No |

If yes, please provide a signed declaration in which the Company states that the Company does not tolerate or engage in any form of corruption, bribery, money laundering or terrorist financing. The declaration - not older than three months - should be signed by a person listed in the Powers of Attorney (PoA) or Delegation of Powers (DoP) of the Company and countersigned by a recognised auditor.

5. Are any of the Company’s directors (CEO, Managing Director, member of the management board, board of directors, supervisory board) considered as Politically Exposed Persons (individuals entrusted with prominent public functions, whether in their country or abroad, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials)?

|  |  |
| --- | --- |
| 1. Yes | No |

6. In the past three years, none of the Company or its directors, employees, consultants, third-party service providers, agents, and other persons acting on behalf of the Company, is or has been accused, charged or convicted for any (alleged) offense[[11]](#footnote-11), and no such accusation, charge, or conviction have been threatened, or are pending and there are no circumstances likely to give rise to any investigation, inquiry or proceedings.

|  |  |
| --- | --- |
| Yes | No |

If yes, please provide all necessary details below

|  |
| --- |
|  |

7. Please list below any (other) event(s) that may have affected the company's reputational risk over the past three years.

|  |
| --- |
|  |

# **Your trading profile and capability to intervene**

1. Please state on which market segments your Company is, or wants to become active?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Spot Market | Active | Interest | Futures Market | Active | Interest |
| CEGH | ☐ | ☐ | CEGH | ☐ | ☐ |
| ETF |  |  | ETF |  |  |
| THE |  |  | THE |  |  |
| NBP |  |  | NBP |  |  |
| OTE |  |  | OTE |  |  |
| PEG |  |  | PEG |  |  |
| TTF |  |  | TTF |  |  |
| ZTP |  |  | ZTP |  |  |
| PSV |  |  | PSV |  |  |
| PVB |  |  | PVB |  |  |
| Turkish Market |  |  | JKM (LNG) |  |  |
| Slovak Market |  |  | Henry Hub |  |  |
| Henry Hub |  |  |  | | |

If your Company is already admitted/registered on at least one Regulated Market/Exchange, please provide the following details for each admission/registration:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Regulated Market/Exchange | Start date | Type | | | |
|  |  |  | Directly registered |  | Via |
|  |  |  | Directly registered |  | Via |
|  |  |  | Directly registered |  | Via |
|  |  |  | Directly registered |  | Via |

2. Does your Company trade on other markets, e.g. Multilateral Trade Facility (MTF), Organised Trading Facility (OTF), Over-the-Counter (OTC), beside the regulated market places/exchanges stated in the answer to the above question?

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide the following details:

|  |  |
| --- | --- |
| Market | Start date |
|  |  |
|  |  |
|  |  |

3. Does your Company trade exclusively on its own account?

|  |  |
| --- | --- |
| Yes | No |

If No, on whose account does your Company trade in addition to its own?

……………………………………………………………………………………………….

4. Do your traders have adequate qualification/experience for trading energy/energy-related products (e.g. trader certification/admission to exchanges/other markets)?

|  |  |
| --- | --- |
| Yes | No |

5. Does your Company physically supply end customers on the retail segment?

|  |  |
| --- | --- |
| Yes | No |

If yes, in which European countries?

…………………………………………………………………………………………………

6. What are your internal facilities dedicated to gas trading?

|  |  |
| --- | --- |
| Gas dedicated facilities | Details |
| IT solutions / resources / systems / premises |  |
| Backup solutions |  |
| Dedicated trading floor / size |  |
| Other |  |

7.Is your Company considered as a market participant that enters into transactions which need to be reported to ACER (CEREMP platform) and has your Company fulfilled its registration obligation with the relevant National Regulatory Authority (NRA) to make such reporting possible?

|  |  |
| --- | --- |
| Yes | No |

8.Is your Company a company which requires a license to sell gas to end consumers and has this been given by the relevant Regulatory Authority?

|  |  |
| --- | --- |
| Yes | No |

If No, please provide the details why not:

…………………………………………………………………………………………………………

# **Signature(s)**

We authorize Balansys and its affiliated companies to use the information given in this form (including annex and supporting documents) for internal purposes only.

We declare in good faith that all information, answers and documents provided with this form are exact and authentic. We have omitted no important information that could have an impact on the judgment you will make about our request for admission.

|  |  |  |  |
| --- | --- | --- | --- |
| Place | Date | Legally binding signature(s) of the Company | |
|  |  | Signature |  |
| First Name and Surname |  |
| Position |  |
|  |  | Signature |  |
| First Name and Surname |  |
| Position |  |
|  |  | Signature |  |
| First Name and Surname |  |
| Position |  |
|  |  | Signature |  |
| First Name and Surname |  |
| Position |  |

**Annex: Contract-Related Contacts**

***Important****: The contract-related contacts provided hereafter will be applicable for the Balancing Agreement of Balansys you apply for.*

|  |  |  |
| --- | --- | --- |
| Contact type | **Contact information – please fill in** | Contact type details |
| **Administrator contact** | Title (salutation):  Last name:  First name:  Job title:  Email:  Mobile:  Phone: | *Person(s)* ***responsible for the management of the different contact types. Administrator will be able to grant, stop and delete the different contact types for all persons who are taking up a role for the Company.*** *Management will be executed via an extranet role, Administrator will receive credentials once the Due Diligence process is finished*  ***Please add multiple contacts for this role for backup.*** *Please copy-paste to add multiple contacts for this role if needed.* |
|  | | |
| **Main commercial contact** | Title (salutation):  Last name:  First name:  Job title:  Email:  Mobile:  Phone: | *Primary point of contact for any commercial topics.*  *Receives all notifications regarding* ***commercial and contract-related matters as the first contact*** *(e.g. consultations, ICT maintenance notices, etc.)* |
|  | | |
| **Commercial back-up contact** | Title (salutation):  Last name:  First name:  Job title:  Email:  Or generic email (dept./team):  Mobile:  Phone: | *Back-up of the Commercial contact for any commercial topics.*  *Receives all notifications regarding* ***commercial and contract-related matters as the first contact*** *(e.g. consultations, ICT maintenance notices, etc.)* |

|  |  |  |
| --- | --- | --- |
|  | | |
| **Operational contact** | Title (salutation):  Last name:  First name:  Job title:  Email:  Or generic email (dept./team):  Mobile:  Phone: | *Receives all communications regarding* ***gas operations and dispatching (24/7)*** *(e.g. Contact person for setup of an Edig@s connection if desired, operational settings, shipper code, communication channel, ICT maintenance notices etc.)*  *Please copy-paste to add multiple contacts if needed, as in the case of using a service provider.* |
|  | | |
| **IT contact** | Title (salutation):  Last name:  First name:  Job title:  Email address:  Or generic email address (dept./team):  Mobile:  Phone: | *Receives all notifications* ***regarding IT matters*** *(e.g. IT Maintenance, etc.)*  *Please copy-paste to add multiple contacts for this role if needed.* |
|  | | |
| **Finance contact** | Title (salutation):  Last name:  First name:  Job title:  Email address:  Or generic email address (dept./team):  Mobile:  Phone: | *Receives all notifications regarding* ***finance matters*** *(e.g. creditworthiness requirements ifo the execution of the contract, etc.)*  *Please copy-paste to add multiple contacts for this role if needed.* |
|  | | |
| **Digital Invoice Recipient contact** | Title (salutation):  Last name:  First name:  Job title:  Email address:  Or generic email address (dept./team):  Mobile:  Phone: | *Contact receives* ***invoicing and billing-related communications.***  *Notifications of electronic invoices issued on Electronic Data Platfrom will be sent to the email address(es) specified, by default no paper invoices are sent*  *Please copy-paste to add multiple contacts for this role if needed.* |

1. In case the Company is also applying *to become a customer at Fluxys Belgium, the Company only needs to fill in and return the KYC form of Fluxys Belgium and its annex together with the necessary supporting documents applicable for Fluxys Belgium. No separate KYC form needs to be filled in for Balansys as this KYC form, annex and supporting documents will be shared between Fluxys Belgium and Balansys in case of application for Fluxys Belgium (Standard Transmission Agreement) and Balansys (Balancing Agreement). In case the Company would like to make a distinction between the contract-related contacts (Annex 1) for Fluxys Belgium and/or Balansys, the Company can return multiple versions of the Annex 1 indicating Fluxys Belgium or Balansys for which it is applicable.* [↑](#footnote-ref-1)
2. *LEI being Legal Entity Identifier* [↑](#footnote-ref-2)
3. *EAN being European Article Numbering, in case your Company wants to be active on Distribution Domestic Points in Belgium* [↑](#footnote-ref-3)
4. *EIC being Energy Identification Code, in case the Company has no EIC number yet, it can be issued by Fluxys Belgium via filling in a form on our* [*website*](https://www.fluxys.com/en/natural-gas-and-biomethane/supplying-europe/belgium/eic-code) [↑](#footnote-ref-4)
5. *TIN being Taxpayer Identification Number and DUNS being Data Universal Numbering System* [↑](#footnote-ref-5)
6. *BIC stands for Business Identifier Code, this is a unique code consisting of either 8 or 11 alphanumeric characters, and all banks and financial institutions are assigned one* [↑](#footnote-ref-6)
7. *Not necessary if this information is already provided as a supporting document* [↑](#footnote-ref-7)
8. [*European sanctions list*](https://www.sanctionsmap.eu/#/main) [↑](#footnote-ref-8)
9. *Ultimate Beneficial Owners (UBO) means:*

   *Category 1: The natural person(s) shareholder(s) who own more than 25% of the shares or the voting rights.*

   *Category 2: The natural person(s) who do(es) not own 25% of the shares or the voting rights, but has/have control over the governance of the corporate entity by any other means (e.g. majority of voting rights; power of control; power to appoint the majority of directors)*

   *Category 3: If, after having exhausted all possible means and provided there are no grounds for suspicion, no person under Category 1 or 2 is identified, or if there is any doubt that the person(s) identified are the beneficial owner(s), the natural person(s) who hold(s) the position of senior managing official(s).* [↑](#footnote-ref-9)
10. *Based on Directive (EU) 2015/849, Article 9, the Commission is mandated to identify high-risk third countries having strategic deficiencies in their regime on anti-money laundering and countering the financing of terrorism.* *According to this Directive, banks and other gatekeepers are required to apply enhanced vigilance in business relationships and transactions involving high-risk third countries. Companies located in countries considered as a high risk third country will only be able to foresee a sufficient rating or a bank guarantee in the framework of the creditworthiness requirements which are due in the framework of the execution of their Agreement(s) with a Fluxys Group affiliated company and/or Balansys.*  [↑](#footnote-ref-10)
11. *Regarding corruption, bribery, influence pedding, illegal commissions, embezzlement of public fund, preferential treatment, business crimes, cybercrime, environmental crimes, financial crimes, fraud, scams, money laundering, sanctions and terrorism.* [↑](#footnote-ref-11)