

MINISTRY OF HOME AFFAIRS

Standard form for the submission of requests to remove a name from the List maintained by the Ministry of Home Affairs pursuant to UNSCR 1373 (2001)

The use of this form is optional. If used, please complete as many fields as possible.

Please send the completed form to:

- by mail:

*Ministry of Home Affairs
Security and Public Order Division
Level 10 Block D1 Complex D
62546 Putrajaya*

- by fax:

- by email: amlcft@moha.gov.my

I. FOR AN INDIVIDUAL		
Permanent Reference Number (PRN)		
Full name (in Latin alphabet, as it appears on the List)		
Date of birth	(DD/MM/YYYY)	Day: Month: Year:
Place of birth (city/area/country)		
Male / Female		
Nationality or citizenship(s)	Current	
	Previous (add dates)	
State(s) of residence	Current	
	Previous (add dates)	
Address	Primary address (city/area/country)	
	Other addresses (current/previous)	
Location (if different from address)	Current	
	Other	
Associated Entity (entities) on the Al-Qaida Sanctions List (cf. paragraph 5 of Security Council resolution 1989(2011))		
Please indicate if the individual is deceased <i>Paragraph 31 of Security Council resolution 1989 (2011) encourages States to submit delisting requests for individuals that are officially confirmed to be dead</i>		Yes [] No [] If yes, please provide a death certificate or similar official documentation confirming the death, which should include, to the extent possible, the full name, permanent reference number and date of birth of the individual, and the date and place of death, as well as any further information about the circumstances of the death. See also part III of this form.
Other information		
II. FOR A GROUP, UNDERTAKING OR ENTITY		
Permanent Reference Number (PRN)		
Full Name (in Latin alphabet, as it appears on the List)		
Short name / acronym(s)		
Registration and other identification numbers		
Registered Address	Current	
	Previous, if any	
Type of entity		
Location	Current	
	Previous, if any	
Known assets / location of assets / origin of assets		
Please indicate if the entity is reported or confirmed to have ceased to exist <i>Paragraph 31 of Security Council resolution 1989 (2011) encourages States to submit delisting requests for entities reported or confirmed to have ceased to exist</i>		Yes [] No [] If yes, please provide official confirmation. See also part III of this form.
Other information		

III. IDENTIFIED FROZEN ASSETS OF DECEASED INDIVIDUALS OR ENTITIES THAT HAVE CEASED TO EXIST (SECTION FOR REPRESENTATIVES OF MEMBER STATES)

Paragraph 31 of Security Council resolution 1989 (2011) encourages States to take all reasonable measures to ensure that the assets that belonged to these individuals or entities have not been or will not be transferred or distributed to other individuals, groups, undertakings and entities on the Al-Qaida Sanctions List

For deceased individuals, is any legal beneficiary of the deceased's estate, or any joint owner of his/her assets, on the Al-Qaida Sanctions List?

Yes [] No [] (If yes, please provide details)

For defunct entities, is any legal beneficiary of the defunct entity, or any joint owner of its assets, on the Al-Qaida Sanctions List?

Yes [] No [] (If yes, please provide details)

IV. PREVIOUS DELISTING REQUESTS (IF KNOWN)

Has a de-listing request pertaining to this individual or entity been submitted before?

Yes [] No []

If yes, please elaborate:

V. JUSTIFICATION

The delisting request should explain why the individual or entity concerned no longer meets the criteria described in paragraphs 4 and 5 of resolution 1989 (2011). Attach documentation where appropriate.

VI. SUBMISSION OF DELISTING REQUEST

A request for the de-listing of _____, currently inscribed on the Al-Qaida Sanctions List of the 1267/1989 Sanctions Committee under permanent reference number _____, is hereby submitted.

(date and signature/official seal)

(capacity in which submitting form)