

MINISTRY OF HOME AFFAIRS

STANDARD FORM FOR LISTING OF INDIVIDUALS Section 66B(1), AMLATFA 2001 – Declaration of specified entity

I.A - IDENTIFYING INFORMATION THAT WILL APPEAR ON THE LIST

Applicants are requested to provide the Ministry with as much relevant information as possible, in particular sufficient identifying information to allow for the accurate and positive identification of the individual concerned.

Full name (In capital letters)									
Name components (Provide 1 – 8 components. On the columns to the left, please describe each part of the name as first, middle or family name, et cetera.)									
Describe name component (√)									
					Name of:			Other, please describe in writing	
First name	Middle name	Last name	Family name	Religious title	Father	Grandfather	Mother	Race/ Sub-ethnic	
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
Spelling variations or other transliterations if used in official documents									
Original script (as to appear on the List)		Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:							
Other script(s) (if used officially)		Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:							
Date of birth		(DD/MM/YYYY) Additional information			Day:		Month:		Year:
Place of birth (city/area/country)									
Alternative dates or places of birth or places of birth (please explain)									
Male / Female									
Nationality or citizenship(s)		Current							
		Previous (add dates)							
State(s) of residence		Current							
		Previous (add dates)							
Passport(s), other travel documents and national identification documents		Document type (see explanatory notes)			Passport () Driver license () National identity card () Birth certificate () Social security card () Other () Which:				
		Document number							
		Name issued to (in original script)			Name: Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:				
		Issued by (authority, city, country)							
		Issue date			Day:		Month:		Year:
		Expiry date			Day:		Month:		Year:
Additional information									

To add more documents, make a copy of and fill in annex A. Please provide a copy of the document if possible.

Aliases/ Also-Known- As	If the individual has aliases/also-known-as names, both current and formerly used, please fill in annex B. Provide this information only if the data is sufficient to allow for the accurate and positive identification of the individual concerned; otherwise include this information in section I.B of this form, in fields designated for nicknames and other pseudonyms <u>not</u> sufficient for accurate and positive identification. For definitions please see explanatory notes.
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I.B - ADDITIONAL IDENTIFYING INFORMATION THAT MAY ALSO APPEAR ON THE CONSOLIDATED LIST
Applicants are requested to provide the following information in order to facilitate the identification of the individual concerned.

Nicknames, diminutives and other pseudonyms (Not legal names, not sufficient for positive identification.)	Type	Nickname () Adopted name () Other () which:
	Additional information about this pseudonym	

To add more pseudonyms fill in an additional sheet (annex C)

Title(s)	
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Employment / Occupation (please provide dates and nature of employment, in particular regarding positions held in listed entities)	
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Marital status	
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Address	Primary address	
	Other addresses (current/previous)	

Location (if different from address)	Current	
	Alternative	

Status	Wanted / Subject to arrest warrant	Yes () No ()Not Known () If yes, please explain:
	Detained (please provide date of likely release)	Yes () No ()Not Known () If yes, please explain:
	Convicted / Sentenced (please provide details of sentence)	Yes () No ()Not Known () If yes, please explain:
	Others (please see explanatory notes)	Yes () No ()Not Known () If yes, please explain:

Relevant INTERPOL Notices	Yes () No ()Not Known () If yes, please explain:
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Other supplementary information	
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Names of parents	Father's name	
	Mother's name	

Residency permits or visas of individual, or similar official documents	Document type	Residency permit () Work permit () Visa () Alien registration card () Other () Which:
	Document number	
	Issued by (authority, city, country)	
	Issue date	Day: Month: Year:
	Expiry date	Day: Month: Year:
	Additional info	

Other identity documents	Document type	<input type="checkbox"/>
	Document number	
	Issued by (authority, city, country)	
	Issue date	Day: Month: Year:
	Expiry date	Day: Month: Year:
	Additional info	

Official identity number	Type	National Identity card () Alien registration number () Customer ID number () National ID number () Employee number () Tax ID () Other () which:
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	Number	
	Issued by (authority, city, country)	
	Other details	
Other numbers (indicate type, number and issuer as above)		
I.C – PHYSICAL DESCRIPTION		
Height (cm)		Eye color
Weight (kg)		Hair color
Build		Complexion
Ethnic background		
Photograph, sketch, computer image attached?		Yes (<input type="checkbox"/>) No (<input type="checkbox"/>) If yes, type(s):
Other biometric identifiers attached? For example fingerprints, DNA code, iris scan or digital facial image		Yes (<input type="checkbox"/>) No (<input type="checkbox"/>) If yes, type(s):
Distinguishing marks and other physical characteristics		
Languages spoken		
Additional physical characteristics		
I.D – OTHER IDENTIFYING INFORMATION NOT SPECIFIED ABOVE		
II. BASIS FOR LISTING		
Applicants are requested to indicate in one or more of the fields below the nature of the crime (act of terrorism) in accordance with the requirement under 66B (1) of the AMLATFA 2001.		
[<input type="checkbox"/>](a) any person or entity who commits or attempts to commit terrorist acts, or who participates in or facilitates the commission of terrorist acts;		
[<input type="checkbox"/>] (b) any entity owned or controlled, directly or indirectly, by any person or entity designated under paragraph (a);		
[<input type="checkbox"/>] (c) any person or entity acting on behalf of, or at the direction of, any person or entity designated under paragraph (a)		
III. STATEMENT OF CASE		
The Statement of Case should provide as much detail as possible on the basis(es) for listing, including: (i) specific information supporting a determination that the individual meets the criteria above; (ii) the nature of the information, for example, intelligence, law enforcement, judicial, media, and admissions by subject; and (iii) additional information or documents provided with the submission. Applicants should include details of any connection between the individual proposed for listing and any currently listed individual or entity.		
III.A STATEMENT OF CASE (RELEASABLE UPON REQUEST)		
III.B PARTS OF STATEMENT OF CASE IDENTIFIED AS BEING CONFIDENTIAL TO THE COMMITTEE		
V. INTERPOL COOPERATION		
The Security Council stressed in its resolution 1699 (2006) that its sanctions measures are often implemented under national law, including criminal law where applicable, and that enhanced cooperation between the United Nations and INTERPOL would enhance States' enforcement of those laws. In the same resolution, the Security Council encouraged Member States to use the tools offered by INTERPOL to reinforce the implementation of mandatory measures adopted by the Security Council, particularly the freezing of assets, travel bans, and arms embargoes. In this connection, the Committee regularly requests INTERPOL to issue INTERPOL-United Nations Security Council Special		

Notices to alert national law enforcement authorities in INTERPOL member countries that designated individuals and entities are subject to Security Council sanctions.

INTERPOL may for implementation purposes wish to contact the relevant authorities in your country, with a view to obtaining additional information on the individual(s)/entity(ies) proposed for designation herewith. For this purpose, please indicate below if the Committee may inform INTERPOL, upon INTERPOL's request, that your country is a **designating State** of the abovementioned individual(s) (INTERPOL would then contact your country's permanent mission to the United Nations in New York with the relevant inquiries).

Yes [] No [] Comments:

In addition, please indicate below if the Committee may convey to INTERPOL, upon INTERPOL's request, the details of the point of contact below within your Government (INTERPOL may then contact directly the contact point below with the relevant inquiries).

Yes [] No [] Comments:

VI. POINT OF CONTACT

The individual(s) below may serve as a point-of-contact for further questions on this submission:

(THIS INFORMATION SHALL REMAIN CONFIDENTIAL)

Name:

Position/Title:

Contact details:

Office:

Address:

Telephone number:

Fax number:

E-mail address:

ANNEX A – Additional identification documents

Make as many copies of this sheet as needed and fill them in where relevant – other entries may remain blank.

Passport(s), other travel documents and national identification documents	Document type (see explanatory notes)	Passport () Driver license () National identity card () Social security card () Birth certificate () Other () Which:
	Document number	
	Name issued to (in original script)	Name: Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:
	Issued by (authority, city, country)	
	Issue date	Day: Month: Year:
	Expiry date	Day: Month: Year:
	Additional information	

Passport(s), other travel documents and national identification documents	Document type (see explanatory notes)	Passport () Driver license () National identity card () Social security card () Birth certificate () Other () Which:
	Document number	
	Name issued to (in original script)	Name: Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:
	Issued by (authority, city, country)	
	Issue date	Day: Month: Year:
	Expiry date	Day: Month: Year:
	Additional information	

Residency permits or visas of individual, or other identity documents	Document type	Residency permit () Work permit () Visa () Alien registration card () Other () Which:
	Document number	
	Issued by (authority, city, country)	
	Issue date	Day: Month: Year:
	Expiry date	Day: Month: Year:
	Additional info	

Other identity documents	Document type	
	Document number	
	Issued by (authority, city, country)	
	Issue date	Day: Month: Year:
	Expiry date	Day: Month: Year:
	Additional info	

Official identity number	Type	National Identity card () Alien registration number () Customer ID number () National ID number () Employee number () Tax ID () Other () which:
	Number	
	Issued by (authority, city, country)	
	Other details	

Other numbers (indicate type, number and issuer as above)	
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ANNEX B – Aliases and Also-Known-As

Include only if data is sufficient to allow for the accurate and positive identification of the individual concerned, otherwise include as nickname, diminutive or other pseudonym in section I.B. of the standard form. Make as many copies of this sheet as needed and fill them in where relevant – other entries may remain blank.

Full name (in Latin alphabet, as to appear on the List)	
Name components	Describe name component

(Provide 1 – 8 components. On the columns to the left, please describe each part of the name as first, middle or family name, et cetera.)		First name	Middle name	Last name	Family name	Religious title	Name of:				Other, please describe in writing
							Father	Grandfather	Mother	Race/Sub-ethnic	
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
Spelling variations or other transliterations if used in official documents											
Original script (as to appear on the List)		Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:									
Other script(s) (if used officially)		Indicate script: Arabic () Chinese () Dari () Pashtu () Russian () Urdu () Other () Which:									
Date of birth		(DD/MM/YYYY) Additional information				Day:		Month:		Year:	
Place of birth (city/area/country)											
Alternative dates or places of birth (please explain)											
Nationality or citizenship(s)		Current									
		Previous (add dates)									
State(s) of residence		Current									
		Previous (add dates)									
Any additional information (background on alias)											
ANNEX C – ADDITIONAL NICKNAMES, DIMINUTIVES OR PSEUDONYMS											
Include only if data is not sufficient for accurate and positive identification of the individual concerned Make as many copies of this sheet as needed and fill them in where relevant – other entries may remain blank.											
Nicknames, diminutives and other pseudonyms (Not legal names, not sufficient for positive identification)		Type				Nickname () Adopted name () Other () Which:					
		Details (in Latin script)									
		Additional information about this pseudonym									
Nicknames, diminutives and other pseudonyms (Not legal names, not sufficient for positive identification)		Type				Nickname () Adopted name () Other () Which:					
		Details									
		Additional information about this pseudonym									
Nicknames, diminutives		Type				Nickname () Adopted name () Other () Which:					
		Details									

and other pseudonyms (Not legal names, not sufficient for positive identification)	Additional information about this pseudonym	
Nicknames, diminutives and other pseudonyms (Not legal names, not sufficient for positive identification)	Type	Nickname () Adopted name () Other () Which:
	Details	
	Additional information about this pseudonym	
Nicknames, diminutives and other pseudonyms (Not legal names, not sufficient for positive identification)	Type	Nickname () Adopted name () Other () Which:
	Details	
	Additional information about this pseudonym	
Nicknames, diminutives and other pseudonyms (Not legal names, not sufficient for positive identification)	Type	Nickname () Adopted name () Other () Which:
	Details	
	Additional information about this pseudonym	