D1.



COMMONWEALTH OF DOMINICA

Ministry of Finance

Citizenship by Investment Unit

D1. APPLICATION FOR CITIZENSHIP BY INVESTMENT **DISCLOSURE FORM**

Surname / Family Name First / Given name		Securely attach 45mm x 35mm
Passport Number		photograph of applicant here
Country of issue		
Date of birth		
	For Official Use Only	
	Reference Number	
	Date Received	
	Authorised Agent's number	

D1. Disclosure Form | © 2014 Government of Dominica |

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IMPORTANT INFORMATION. PLEASE READ CAREFULLY BEFORE COMPLETING THIS FORM

Type or print as legibly as possible. An answer to every question is required. If a question does not apply to you indicate with "n/a". If space is insufficient, use a separate sheet.

All individuals are advised that this personal history record is an official document and any misrepresentation or failure to reveal information requested may be deemed to be sufficient cause for the refusal or revocation of his / her application.

Information about making a valid application

To make a valid application please ensure that you:

- use only the original Disclosure form issued by the government or an authorised agent;
- provide the address of where you intend to live while your application is being dealt with. A post office box address will not be accepted as your residential address;
- pay the required due diligence, application, processing fees, and be able and willing to pay the full investment amount;
- lodge your application through an authorised agent; [PLEASE NOTE: any application lodged in any other way cannot be accepted and will not be a valid application and will not be processed. For further information refer to the department's website at the time you are planning to make your application.]

You must also:

- complete the form in English;
- · answer all questions truthfully; and
- provide supporting documents where required in the prescribed format

Read the notes on each question. If a question is not applicable, write 'N/A'. Any changes or corrections you make must be initialed and dated by each person who signs the form. If you use the page provided in the form or any other sheets of paper for additional information, each must also be signed and dated by all persons who sign the form.

Information on authorised agents

An authorised agent is someone who is licensed by the Citizenship by Investment Unit and who can:

- tell you the documents you need to submit with your application;
- help you fill in the application and submit it; and
- communicate with the Citizenship by Investment Unit on your behalf.

You must appoint an authorised agent to submit your application and your agent will be the person with whom the Citizenship by Investment Unit will discuss your application and from whom it will seek further information when required.

Information on authorised agents, including a list of licensed agents, is available on the Citizenship by Investment Unit website. Only licensed authorised agents should be used to process your application.

Integrity of application

The Citizenship by Investment Unit is committed to maintaining the integrity of the citizenship programme. In relation to this application, if:

- you;
- a member of your family unit included in this application; or
- a third party acting on your behalf;

Provide or have provided in a previous application relating to yourself or a member of your family unit included in this application, false or misleading information or documents (either knowingly or otherwise) this application is likely to be refused and you and any members of your family unit will be subject to the penalties laid out in the Regulations regarding Citizenship by Investment.

Life in Dominica

The Dominican Government encourages people to gain an understanding of Dominica, its people and their way of life, before applying for citizenship.

The Commonwealth of Dominica is founded upon principles that acknowledge the supremacy of God and recognise fundamental human rights and freedoms, the position of the family in a society of free men and free institutions, the dignity of the human person, and the equal and inalienable rights with which all members of the human family are endowed.

Fundamental human rights and freedoms are enshrined in the Constitution of the Commonwealth of Dominica. Every person in Dominica is entitled to the following rights and freedoms whatever his race, place of origin, political opinions, colour, creed or sex, but subject to respect for the rights and freedoms of others and for the public interest, namely:

- life, liberty, security of the person and the protection of the law;
- freedom of conscience, of expression and of assembly and association; and
- protection for the privacy of his home and other property and from deprivation of property without compensation.

Citizenship by Investment Unit (CBIU)

www.cbiu.gov.dm

Email: cbiu@dominica.gov.dm Address: 3rd Floor, Financial Centre

> Ministry of Finance Kennedy Avenue

Roseau

Tel:

Commonwealth of Dominica

+1 767 266 3919

+1 767 266 3456

PART A: Personal Information

A1	Last / Family Name							A	\10	Name in Languag	n Local ge Characters					
A2	First / Given Name							A	\11	Mother	's Maiden Name					
А3	Middle Name(s)							A	12		ecurity/National urity / National II		ation nu	mber	· / Tax Number: Country:	
A4	Other names you are, or have, been known by (name at birth, previous married name or aliases). Include date of change									oociai see	uny / Pational I	3 110			Country.	
A5	and reason for change Date of Birth	DD		MM		\	YYYY] A	\13		rs Licence Numb	er			Country	
Аб	Gender	Λ	Male			Fema	ale									
A7	Place and Country of Birth															
A8	Country of Citizenship															
A9	Passport information							J								
	Passport Number			Passpor	rt 1					Passp	ort 2					
	Issuing Country															
	Date of Issue															
	Date of Expiry															
A14	Do you hold, or have yo	ou ever held,	any other	citizensl	hips?		Yes	N	No							
	If "yes", please specify the which such changes were		l passport 1	number o	or ID nu	mber ir	n that country	y. List a	any da	ates of any	changes of citize	nship incl	uding rel	inqui	ishing citizenship and the	place at
A15	* Languages that you read	d, understan	d, speak a	nd / or w	rite flu	ently										
A16	Please list the details of	all family m	embers in	cluded ir	n this ap	plicati	ion:									
	Full Name		Date of	f Birth (do	d/mm/y	ууу)	Nationality	/ Curi	rent c	itizenship	Passp	ort Numb	er		Relationship to main ap	plicant
														-		

Curr	ent Address			Physi	cal Identifying Chara	acteristics			
A17	Full Address			A23	Color of Eye				
				A24	Color of Hair				
	City			A25	Weight(kg)				
	State			A26	Height(cm)				
	Country			A27	Distinguishing				
	Postal / Zip Code				Marks				
	Date Since	MM YYYY		Milita	ary Information				
Perm	anent residential ad	ldress		A28	Have you ever served	l in any ar	med forces?	Yes	No
A18	Full Address			A29	Branch				
				A30	Date of entry active s	service	DD	MM	YYYY
	City			A31	Date of separation		DD	MM	YYYY
	State			A32	Type of Discharge				
	Country			A33	Ranking at separation				
	Postal / Zip Code			A34	Serial Number				
	Date Since	MM YYYY		A35	Were you ever arrester resulted in summary or general court mart	action, a t		Yes	No
A19	Home Telephone			If y	es, please provide detail				
A20	Cell phone / Mobile phone								
A21	Fax Number			j					
A22	Email Address								
A36	Please list all addres	sses where you have lived fo	r the last ten (10) years, please en	sure that th	nere are no gaps in your	r history.			
	Date from	Date to	Full addre	ss (street ad	ldress, town, postal code	e, country)			
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							
N	IM/YYYY	MM/YYYY							

PA	KI B: WORK,	Busines	s and 5	our	ce o	I AAG	earm	ı ınıo	rmation						
B37	Occupation by training								List all companies						
B38	Current Primary Occupation							B47	of which you are currently a shareholder or						
B39	Are you self-employed?	?		Yes		No			director						
B40	Name of your primary business or employer			l											
B41	Nature of business or employer's business														
B42	Registered address of business or employer							B48	Please provide the det in any state, (e.g. liquo Position / Designation Held	or, real esta Lic		nancial	services or Lice		
B43	Business telephone number	()													
B44	Business fax number	()							Have you ever had any	z disciplina	rv action taken			1	
B45	Business or employers website address							B49	against you in respect			Ye	s	No	
B46	If own business, registration number and country								If "yes" explain the nature of the action						
Incon	ne, Source of Funds and S	Source of Wealth													
B50	Your estimated gross annual net income (USD)	\$						B53	Main geographical jurisdictions in which you conduct business						
B51	Your total estimated net worth (personal assets minus personal liabilities)	\$													
B52	Main sources and business activities from which you generate your main source of income							B54	Most important companies / persons with whom you do business						
B55	Please provide a summa necessary)	rized statement o	of how you hav	e accum	nulated	your To	tal Net V	Vorth by lis	sting the main acquisition	ons /dispos	sitions and events (contin	ue on addi	tional p	aper if
B56	In the table below, pleas	se provide the est	imated value o	f your a	issets an	nd liabili	ities (Ple	ase provide	documentary support	for these es	stimations).				
	Assets			Amour	nt				Liabilities			Amou	nt		
	Fixed Assets (eg.prope vehicle, etc.)	erty,							standing Long Term Lo tgage, car loan, persona						
	Savings / Deposits								standing short Term Lo it card bills, tax liabilitit						
	Investments (eg.stocks, bonds, debentures, etc.)							Oth	ers (please specify)						
	Others (please specify)								Total						
	Total														
B57	Please provide the per	sonal bank acco	unt details fro	m whic	ch you	will be	sending	 funds to t	he Government of Do	minica					
	Name of Account holder							IB	AN / BIC Code						
	Account Number								nk Name and dress						

B58	Please give details of	all schools, or training instituti	ons attended and a	all qualification	s obtained up to the highest	level of education y	you successfully c	completed.	
	Period	Name of school			Address		Qualification	/ diploma achieved	
Start	MM YYYY								
End	MM YYYY	/							
Start	MM YYYY	/							
End	MM YYYY	7							
Start	MM YYYY	(
End	MM YYYY	(
Start	MM YYYY	(
End	MM YYYY	(
B59	Please give details of y	our employment history during	he last 10 years (Li	st most recent e	xperience first)				
Pe	Period(Start / End) Name of Employer		Address of Empl telephone		t Position held		f business / Reasons for leav dustry		
N	MM YYYY						•		

MM YYYY

MM YYYY

MM YYYY

PA	RT C: Info	rmation a	bout yo	our fam	ily							
								ne following details a other page if necessa		our pre	vious spouse	S
C60	Are you	a. Single			ivorced		Name	-				
		b. Married		e. Wi	idowed	Щ	Place and Date					
		c. Separated		f. En	gaged		of Birth					
							Nationality Date of Divorce					
C61	If currently marri	ed, please provide	details of your	marriage	1		Order / Decree					
	Date of marriage		DD	MM	YYY	ΥΥ	Period of Marriage					
(Place of marriage (City / State/ County						Г					
/	Country)						Name					
Detai (If en	ls of your spouse gaged, enter details	of future spouse)					Place and Date of Birth					
C62	Spouse's Full						Nationality Date of Divorce					
	Name (Maiden) Spouse's Place of						Order / Decree					
C63	Birth						Period of Marriage					
C64	Nationality / Citizenship											
C65	Passport Number						Details of your family Please provide details of al	ll family mambars w	hathar apply	ring for	ritizanchin w	rith
C66	C 2 D : 1 .	. 1 11 (:61:00					you or not, including when	re relevant, those leg	ally adopted.	. If any fa	amily memb	er is
C66	Full Address	ial address (if diffe	rent)				deceased, please give their	details and write de	ceased in th	е пета	Kesidentiai <i>F</i>	laaress
	Tun Address						C71 Details of your fath	her				
							a. Last name / Family name					
	City						b. First / Given name					
	State						c. Date of Birth	DD	MN	/	YYY	Υ
	Country						d. Place of Birth					
	Postal / Zip Code						e. Citizenship / Nationality					
	Home Telephone (if different)						f. Residential Address					
	Spouse's Work Telephone						g. Occupation					
	Cell Phone / Mobile						h.Is this parent include your application	ed in	Yes		No	
C67	Occupation						C72 Details of your mo	other				
C68	Spouse's Employe						a. Last name / Family name					
C69	_	's Employer/Busines	s Entity				b. First / Given name					
	Full Address						c. Date of Birth	DD	MN	/	YYY	Υ
							d. Place of Birth					
	City						e. Citizenship /					
	State						Nationality f. Residential Address					
	Country						g. Occupation					
	Postal / Zip Code						h.Is this parent include your application	ed in	Yes		No	

Details of your father	r-in-law								
a. Last name / Family name					a. Last name / Family name				
b. First / Given name					b. First / Given name				
c. Date of Birth	DD	MM	YYY	Υ	c. Date of Birth	DD		MM	YYYY
d. Place of Birth					d. Place of Birth				
e. Citizenship / Nationality					e. Citizenship / Nationality				
f. Residential Address					f. Residential Address				
g. Occupation					g. Occupation				
h.Is this parent included i your application	n	Yes	No		h. Gender				M
Details of your mother	er-in-law				a. Last name / Family				
a. Last name / Family name					name				
b. First / Given name					b. First / Given name				
c. Date of Birth	DD	MM	YYY	Υ	c. Date of Birth	DD		MM	YYYY
d. Place of Birth					d. Place of Birth				
e. Citizenship / Nationality					e. Citizenship / Nationality				
f. Residential Address					f. Residential Address				
g. Occupation					g. Occupation				
h.Is this parent included in your application	n	Yes	No		h. Gender				 M
Details of all brothers	s and sisters (inclu	iding half, step a	and adopted sibl	ings)	a. Last name / Family				
a. Last name / Family name					name				
b. First / Given name					b. First / Given name				
c. Date of Birth	DD	MM	YYY	Υ	c. Date of Birth	DD		MM	YYYY
d. Place of Birth					d. Place of Birth				
e. Citizenship / Nationality					e. Citizenship / Nationality				
f. Residential Address					f. Residential Address				
g. Occupation					g. Occupation				
h. Gender			М	F	h. Gender				M F
a. Last name / Family name					a. Last name / Family		•••••		
b. First / Given name					b. First / Given name				
c. Date of Birth	DD	MM	YYY	Υ	c. Date of Birth	DD		MM	YYYY
d. Place of Birth					d. Place of Birth				
e. Citizenship / Nationality					e. Citizenship / Nationality				
f. Residential Address					f. Residential Address				
g. Occupation					g. Occupation				
h. Gender			М	F	h. Gender				MF

Tick if you have any additional information added at the end of this form or on separate pages. Page 8

b Details of children (bid	ological, adopted	and step-o	cniiaren)										
a. Last name / Family name							a. Last name / Family name						
b. First / Given name							b. First / Given name						
c. Gender					М	F	c. Gender					М	F
d. Date of Birth	DD		MM		YYY	Υ	d. Date of Birth	DD		MM		YYYY	
e. Place of Birth							e. Place of Birth						
f. Citizenship / Nationality							f. Citizenship / Nationality						
g. Residential Address							g. Residential Address						
h. Occupation							h. Occupation						
i. Is this child included in your application?	1		Yes		No		i. Is this child included in your application?			Yes		No	
·····	•••••	••••••	•••••	••••••				•••••	•••••	•••••		•	
a. Last name / Family name							a. Last name / Family name						
b. First / Given name							b. First / Given name						
c. Gender					М	F	c. Gender					М	F
d. Date of Birth	DD		MM		YYY	Υ	d. Date of Birth	DD		MM		YYYY	
e. Place of Birth							e. Place of Birth						
f. Citizenship / Nationality							f. Citizenship / Nationality						
g. Residential Address							g. Residential Address						
h. Occupation							h. Occupation						
i. Is this child included in your application?	1		Yes		No		i. Is this child included in your application?			Yes		No	
		••••••	•••••				<u></u>	•••••	•••••	•••••	•••••		
a. Last name / Family name							a. Last name / Family name						
b. First / Given name							b. First / Given name						
c. Gender					М	F	c. Gender					М	F
d. Date of Birth	DD		MM		YYY	Υ	d. Date of Birth	DD		MM		YYYY	
e. Place of Birth							e. Place of Birth						
f. Citizenship / Nationality							f. Citizenship / Nationality						
g. Residential Address							g. Residential Address						
h. Occupation							h. Occupation						
i. Is this child included in your application?	1		Yes		No		i. Is this child included in your application?			Yes		No	
•••••							•••••						

PA:	RT D: Declara	ations										
D77	Have you ever been arrindicted, convicted, fou expunged of any offenc any country (Except M	e(s) against the law in	Yes		No		D86	Have you ever been involved, directly indirectly, in the financing of terroris any terrorist or criminal organization	m or in	s	No	
D78	Have you ever testified investigative hearing or	before a grand jury or	Yes		No		D87	Have you ever been under investigati law enforcement agency or tax autho country?	1 17-	s	No	
D79	Have any charges, or activity of any nature be any country?	ccusations of illegal een made against you in	Yes		No		D88	Have you ever been involved persona a director in any bankruptcy, insolved liquidation?		S	No	
D80	Have you ever been sen of time in detention or	stenced to serve a period been in probation?	Yes		No		D89	Have you ever been refused an entry visa to, or residency permit in any country, been unlawfully present in, been deported from any		s	No	
D81	Have you ever received criminal offense? (If yes County, State and Cour	s, note Date, City,	Yes		No		D90	country, or sought to assist others to same? Have you ever had a visa cancelled?	do the Ye:	s	No	
D82	Have you ever had a cive expunged or sealed by a yes, give details.	ril or criminal record a court order? Yes /No If	Yes		No		D90	Have you ever applied for citizenship country and citizenship has not been		s	No	
D83	Have you ever been sub testify before a federal, jury, board or commiss	state, or county grand	Yes		No		D92	Have you ever been the subject of any order, judgment or decree of any feder or state authority barring, suspending otherwise limiting your right to enga	eral g, or Yes	s	No	
D84	Has a criminal indictm complaint ever been ret for which you were not were named as an un-in	turned against you, but arrested or in which you	Yes		No		D93	professional or business practice or a Have you ever been a senior politicia state or government, official of a politicial senior judicial or military official, and	n, head of tical party, Yes	s	No	
If you	corporation or other en to a lawsuit as either a p (Other than divorces). have answered yes to any		Yes	provide w	No vith fur	ther deta	ils:					
D04	Please provide the details	s of two character reference	es who	have kno	wn voi	u for five	(5) years	or more. Do not include relatives, pres	ent employers or	employees		
D94	a. Full Name	of two character reference	.cs wiic	Tiave Kiic		u 101 11vc	(3) years	in more. Do not include relatives, pres		Спрюусс	•	
	b. Street Address											
	c. City / State d. Country and postal											
	code											
	e. Home Phone											
	f. Cell Phone /Mobile Number											
	g. Email Address											
	h. Years Known											
	i. Occupation											
		i e e e e e e e e e e e e e e e e e e e						1 1				
	j. Employer											

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PART E: Additional Information

Question Number	Additional information and / or description of attachments

PART F: Required Documents You must provide the following documents with your application. Please ensure that these comply with the requirements of the Citizenship by Investment Regulations and any circulars The following documents are required from the main applicant only: issued by the Citizenship by Investment Unit: Two (2) completed and signed copies of Application Form 12 D4. Investment Agreement or Proof of real estate investment for each applicant D2. Fingerprint and Photo Verification Form One (1) professional reference* D3. Medical Certificate and HIV test* Two (2) Personal references* Certified copy of passport Recommendation from applicant's bankers / 6 months' bank statements* Original and/or certified copy of birth certificate Proof of residential address* Certified copy of national ID document Certified copy of Marriage Certificate/Dissolution of Marriage Letter of Employment/Audited Financial Statement / Letter of Incorporation Four (4) passport size photos for each applicant Military Service and Discharge Documents Police Record from country of birth and country of residence (if different) for each applicant sixteen (16) years and over* *Kindly note that these documents are only valid if prepared within a certain amount of time prior to submitting the application to the Citizenship by Investment Unit. Please ask your authorised agent for further assistance. PART G: Assistance with this Form G95 Did you receive assistance completing this form? Appointment of authorised agent Please provide your authorization for the agent who will represent you to the Citizenship by Investment Unit: If Yes, please give the details of the person who assisted you: hereby authorise a. Name to act on my behalf with regard to this application, submit the application, receive b. Company name

d. Contact information (email and telephone)

Is the person an agent registered by the Citizenship by Investment Unit?

Unsure

communications including my comfort letter and citizenship certificate and submit replies to any queries on my behalf.

Please Note: you may cancel or revoke this authorization at any point in the application process. In order to do so you must inform the Citizenship by Investment Unit in writing that you have cancelled or revoked your authorization and provide the Citizenship by Investment Unit with the name and full contact details of your replacement authorised agent.

c. Address

PART H: Undertakings, Signature and Authorisation

NOTE - Please ensure that you carefully read the undertakings below before signing this document.

Please ensure that the information that you have provided on this form is true and correct. If you have made any false statements or omitted information requested on this form, your citizenship application could be declined. If it is found later that you have provided false or incorrect information, you may be deprived of your citizenship and you may face criminal prosecution.

you may face criminal prosecution.	
Declarations	
Ihe	ereby make the following declarations:
(i) I certify that I have read and understood all of the questions in this for directly by myself or through an agent completing the form on my beh	rm and that the information supplied in or with this form, and any attachments, whether supplied half, is true and up to date in every detail.
of Dominica, either directly, or through any agent that the Gover records or other kind or records about me or my family, which the may be obtained from public sources, government agencies or privor records about me or my family and I release all parties involved Dominica of any personal information about me or my family give	erify any personal information about me or my family. Accordingly, I authorise the Government may decide to engage, in order to obtain further information, credit reports, criminal Government may deem necessary and I understand that such information, reports, and recordivate agencies. I authorise any agencies contacted to furnish the requested information, report I from any responsibility and liability for doing so. I authorise the release by the Government of the one on this form or otherwise obtained by the Government in order to verify such information in the may assist the Government of Dominica in deciding whether I qualify for citizenship
(iii.) I confirm that my wealth has been obtained from completely legitim any kind.	nate sources, and is not, whether directly or indirectly, from the proceeds of criminal activities of
(iv.) I understand that I may be required to attend an interview in person	with officials of the Commonwealth of Dominica prior to the granting of my citizenship.
(v.) I understand that becoming a citizen of the Commonwealth of Domi	inica may affect my present citizenship status.
(vi.) If there is any change in my circumstances between the date of this a this application, I confirm that I will inform the Citizenship by Inves	application and the date of granting of citizenship, which affects the information I have given in stment Unit in writing of this change promptly.
(vi.) In the event of the citizenship of the Commonwealth of Dominica be	eing granted to me, I do solemnly pledge that:
 I will faithfully observe the laws of the Commonwealth of Do I have read and understood the fundamental principles, belief I will conduct myself in a manner which will at no time bring I will not act against the interests of the Commonwealth of D 	efs and values of the Commonwealth of Dominica and will respect these, g disrepute to the Commonwealth of Dominica,
(vii) I confirm that I will put the required amount for the qualifying inves event that Citizenship of the Commonwealth of Dominica is granted	stment in an approved escrow account and that I am ready to proceed with my investment in the d to me.
that any false statement on this form shall be grounds for rejection	form are true and complete to the best of my knowledge and belief and I further understand in. I declare that I have fully read and understood all the statements on this form having ar to me. I hereby apply to be granted citizenship of the Commonwealth of Dominical
Place and Date	Signature of applicant (in case of children under the age of 18, both parents must sign in this space)

