

## APPENDIX II

# COMPLIANCE REPORTING FORM FOR SUSPECTED SANCTIONS BREACHES

- (a) This form should be used to report all compliance-related information to the Governor's Office including information regarding suspected designated persons (Part B); assets you have frozen (Part C); and suspected breaches of financial sanctions (Part D).
- (b) Please note that the information you provide may be shared for the purpose of facilitating or ensuring compliance with financial sanctions regulations.
- (c) Annexes 2 and 3 to this form provide key terms and information to assist you in completing your report.
- (d) Your financial sanctions reporting and compliance obligations are described in the Financial Sanctions Guidance. You should consult this guidance prior to completing this form. You should note that for some businesses there is a legal obligation to report, and that not doing so is a criminal offence.
- (e) Please ensure that when you complete this form, you believe that the facts and information provided in this form are accurate and true to the best of your knowledge.
- (f) You should note that a criminal offence may be committed if you contravene any of the prohibitions in respect of the financial sanctions regime(s) detailed in part 12 below, or you intentionally participate in activities knowing that the object or effect of them is to circumvent any of those prohibitions or enables or facilitates the contravention of any of those prohibitions.
- (g) Please email completed forms, including any associated documents to: [Govoffice.tortola@fco.gov.uk](mailto:Govoffice.tortola@fco.gov.uk) with "SUSPECTED DESIGNATED PERSON", "FROZEN ASSETS", or "SUSPECTED BREACH" as applicable in the subject line.
- (h) Alternatively, completed forms can be posted to:

**Governor's Office**  
Waterfront Drive,  
Road Town, Tortola  
British Virgin Islands

***If you are unsure of your compliance or reporting obligations under financial sanctions, you should seek independent legal advice.***

## PART A: GENERAL INFORMATION

Please complete this part of the form and indicate what you are reporting on.

1. Person submitting this report	
a. Name (Inc. title)	
b. Job title	
c. Company / organisation	
d. Address	
e. Contact number(s)	
f. Email address	

2. Date submitted
[DD – MM – YYYY]

3. Are you submitting this form on behalf of a third party? (Tick box) e.g. you are a law firm, agent or guardian representing someone	Yes	
	No	
If yes, please provide the third party's contact details, including their Group ID if they are a designated person.		

4. What are you reporting? (Tick all applicable)	
Suspected designated person <i>[please complete Part B of this form]</i>	
Frozen assets <i>[please complete Part C of this form]</i>	
Suspected breach <i>[please complete Part D of this form]</i>	

## PART B: REPORTING A SUSPECTED DESIGNATED PERSON

This part should be used to report your knowledge or suspicion that an individual, business or organisation is a designated person and therefore subject to financial sanctions. Please complete a separate form for each designated person on whom you are reporting.

Your report should include information by which a designated person can be identified. For example, aliases or alternative identities that could be used to evade sanctions.

If you are also reporting that you have frozen the assets of a designated person, please complete Part C of this form. If you are also reporting a suspected breach of financial sanctions, please complete Part D of this form.

5. Suspected designated person (including persons owned or controlled by them)	
a. Group ID from the consolidated list	
b. Name of the designated person as given on the consolidated list	
c. Name of the person/entity if owned/controlled by a designated person	

6. Information on which your knowledge or suspicion is based	
a. What has caused you to know or suspect that the person you are reporting on is a designated person (or is owned/controlled by one)?	<i>Please provide as much detail as possible, including your relationship with the person, what information you hold and how it came to you.</i>
b. Please provide any information not already on the consolidated list by which the designated person can be identified	<i>e.g. new aliases, dates of birth, addresses, passport numbers, additional trading names, etc.</i>

## PART C: INFORMATION ON FROZEN ASSETS

This part should be used to report that you have frozen the assets of a designated person. Please complete a separate form for each designated person whose assets you have frozen.

If you know or suspect that a person is a designated person, please complete Part B of this form. If you are also reporting a breach of financial sanctions, please complete Part D of this form.

7. Designated person (DP)	
a. Group ID from the consolidated list	
b. Name of the designated person as given on the consolidated list	
c. Name of the person/entity if owned/controlled by a designated person	

8. Please provide information on <u>all</u> funds and economic resources you have frozen (For definitions and guidance on what to include please see Annexes A & B.)

## Part D: INFORMATION ABOUT A SUSPECTED BREACH

This part should be used to report any suspected or known breach of financial sanctions. Please complete one form for each overarching activity. Multiple transactions/transfers relating to an overarching activity may be listed in one form.

Your report should include all known details in relation to the suspected breach activity. Additional supporting material should be attached to your submission and noted in section 22. Where information is not known or not applicable, please state.

### 9. Who do you suspect has committed, or has attempted to commit, the suspected breach? Please provide details

### 10. Summary of facts

Including the date(s) the suspected breach (or breaches) was discovered, how it was discovered, and the series of actions that led to a suspected breach taking place (where known).

**11. Does this information relate to a suspected completed, or suspected attempted, breach? Tick box**

Completed

Attempted (*including blocked or rejected activity*)**12. Financial sanctions regime(s) under which the suspected breach has occurred**

The list of all financial sanctions regimes in effect in the UK can be found on OFSI's on GOV.UK:

<https://www.gov.uk/government/collections/financial-sanctions-regime-specific-consolidated-lists-and-releases>

Additionally, the list of all financial sanctions regimes in effect in the Virgin Islands can be found on the following:

Financial Investigation Agency:

<https://www.fiabvi.vg/International-Sanctions/Sanctions-Orders-in-Force>

Financial Services Commission:

<https://www.bvifsc.vg/international-sanctions/about-sanctions>

a. Financial sanctions regime(s)

b. Act/Regulation(s) (*if known*)

c. Relevant section(s), article(s), regulation(s) suspected of having been breached (*if known*)

## DETAILS OF SUSPECTED BREACH

See Annex A for a description of what can constitute funds, economic resources, and financial services.

### 13. What does the suspected breach involve: (Tick all applicable boxes).

<b>Funds</b>		
Describe, in full, the type(s) of funds involved.		
<b>Economic resource(s)</b>		
Describe, in full, the economic resource(s) involved.		
<b>Financial Services</b>		
Describe, in full, what the financial services are, including how and when they were provided.		
<b>Licence conditions</b>		
Give the licence condition(s) and describe, in full, how you suspect it has been breached. Please include the licence no.		
<b>Reporting obligations</b>		
Give the reporting obligation and describe, in full, how you suspect it has been breached. Please include the licence no. where relevant.		

**14. Total value of the suspected breach (actual or estimated)**

Please provide this information in the currency that was used at the time of the transfer (or provide an estimated value in USD if unknown).

**15. Method(s) of payment and/or transfer**

*e.g. bank transfer, cash, cheque, money order, internet/electronic, or physical asset transfer – road, rail, air, sea, etc..*

**16. Remitter/sender information**

Please provide full information on the remitter/sender of the funds and/or economic resources, including: dates, goods involved, amount(s), currencies, account names, account numbers and sort codes, bank details, and nationalities of payers, dates of birth, where known.

If more space is required, please complete Annex 1 (A1), or attach supporting documents with your submission.



**17. Intermediary information**

Please provide any information you have on intermediaries involved in the activity, including: role in transfer, name(s), date of birth, company registration information, country of operation/nationality, address/location, account name, account number and sort code and bank details, where known.

If more space is required, please complete Annex 1 (A2), or attach supporting documents with your submission.

**18. Ultimate beneficiary information**

Please provide information on the ultimate beneficiaries of the funds and/or economic resources, including: name, account name, account number and sort code, bank details, residential/company address, date of birth and nationality, where known.

If more space is required, please complete Annex 1 (A3) or attach supporting document(s) with your submission.

**19. Please list all external parties who have been made aware that this information is being passed to OFSI, including any designated persons****20. Has this matter been reported to any other authority?**

If so, please provide their contact details.

**21. Other relevant information**

Please provide any other information you think will help us understand what has happened.

**22. Are you providing any supporting documents?**

Please include any documents that support the information provided, such as bank statements, transaction reports, copies of licences, paperwork, contracts, etc. including those from other jurisdictions.

Yes

No

Please list the supporting documents you are providing.

## **Annex 1**

Additional remittances *(for Section 15 Remitting information)*

### **A1. Additional remittance information**

Additional intermediaries involved *(for Section 16 Intermediary information)*

### **A2. Additional intermediaries**

Additional beneficiaries involved *(for Section 17 Ultimate beneficiary/beneficiaries information)*

### **A3. Additional beneficiaries**