

## Ministry of Finance Office of the Superintendent of Real Estate

## NOTICE OF REQUEST FOR INFORMATION

Under Section 16 of the Proceeds of Crime (Supervision and Enforcement) Act 2008

AML/ATF SUPERVISORY STATISTICAL RETURN												
	FOR REAL ESTATE BROKERS WITH NO PURCHASE OR SALES TRANSACTIONS SINCE											
	1 SEPTEMBER 2016											
A. G	A. GENERAL INFORMATION											
1	Name of real estate broker (individual or legal entity, including "trading as" if applicable)											
2	Address of main office											
3	Broker contact details											
	Name of contact person:											
	Phone No:											
	Email:											
	Fax:											
	Website:											
4	Legal form of		Sole Proprietorship [ ] Partnership [ ] Company [ ]									
	(mark with X) and											
	ROC Registration #		ROC Registration number									
5	List the names of the beneficial											
	owners of your real estate firm <sup>1</sup>											
5a	Ownorship po	rcontago is		<u> </u>								
эа	Ownership percentage is Bermudian (%)											
		'/ '										
5b	Foreign (%)											

<sup>1</sup> Refer Section 3 of the Proceeds of Crime (Anti-Money Laundering and Anti-Terrorist Financing) Regulations 2008. <u>http://www.bermudalaws.bm/Laws/Consolidated%20Laws/Proceeds%20of%20Crime%20(Anti-Money%20Laundering%20and%20Anti-Terrorist%20Financing)%20Regulations%202008.pdf</u>

,	Year first registered to conduct	
•	real estate activities (mm/dd/yy)	
7	Number of local offices or	
	branches in Bermuda, and	
	address of the same	
8	Name of any subsidiaries,	
	affiliates or franchises	
9	Overall business structure	Please provide an organizational chart which details the ownership
		structure, board of directors (if applicable), management, compliance
		officer and reporting officer.
		Organizational Chart Attached: YES NO
10	Personnel matters	Total # of all employees (full and/or part time):
		Total # of contractors for which the Broker holds real estate agent
		licences:
		Total # of real estate licenses held by Broker:
11	Total revenue from all sources	Co-broke arrangements:
	(BMD) <sup>2</sup> broken out as follows:	Rental commissions:
	See Instructions for more	
	reporting information.	Property management services:
		Appraisal/valuation services:
		Other (specify):
		TOTAL:

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<sup>&</sup>lt;sup>2</sup> Total revenue for the calendar year ending December 31, 2018.

	Rentals and Property ManagementSee Instructions for more reporting information.Indicate whether the Broker is reporting in number of: Buildings Units Unit	Number of Properties (reported as # of buildings or # of units)	Value of one year (2018) rents paid under leases or agreements for 2018 only			
	a. Number of COMMERCIAL properties rented to tenants in 2018 (new leases or agreements signed in 2018; do not count multi-year rentals for which leases/agreements were not signed in 2018)					
	b. Number of RESIDENTIAL properties rented to tenants in 2018 (new leases or agreements signed in 2018; do not count multi-year rentals for which leases/agreements were not signed in 2018)					
	c. Number of SHORT TERM or VACATION RENTAL properties rented to tenants in 2018 (new leases or agreements signed in 2018)					
	d. Current number of COMMERCIAL properties managed, including those owned directly by the Broker					
	e. Current number of RESIDENTIAL properties managed, including those owned directly by the Broker					
D. RE	AL ESTATE BROKER ATTESTATION:					
	This Section is to be completed only by Brokers who have not performed one (1) or more sale and/or purchase transaction during the period 1 September 2016 through [date of submission.]					
	[Enter broker name]		6			
	[], the "Broker", has not performed duties as real estate broker during the conduct of one (1) or more Bermuda-based sale or purchase real estate transactions during the period beginning 1 September 2016 through [], inclusive. [enter date of submission] Furthermore, the Broker does not intend to perform duties as a real estate broker during the conduct of one (1) or more Bermuda-based sale or purchase real estate transactions during the current licensing period.					
E. STA	TEMENT					
	I hereby certify that the statements and information contained in this return, including the attestation in Section D above, are true and correct to the best of my knowledge and belief.					
	Name:	,				
	Title					
	Date (mm/dd/yyyy):					