

**STANDARD FORM FOR SUBMISSION TO FRANCE   
FOR FREEZING OF ASSETS OF TERRORIST ENTITIES**

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| **I.A - IDENTIFYING INFORMATION**  *Requesting State is asked to provide France with as much relevant information as possible, in particular sufficient identifying information to allow for the accurate and positive identification of the entity concerned.* |

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| **Full Name** | | Add text here. |
| **Spelling variations or other transliterations if used in official documents** | | Add text here. |
| **Original script** | **Indicate script:** **[Click here to choose]** | Add text here. |
| **Other script(s)**  *(if used officially)* | **Indicate script:** **[Click here to choose]** | Add text here. |
| **Short name / acronym(s)** | | Add text here. |
| **Alias,**  **also-known-as, formerly-known-as** | Details *(spelling in Latin)* | Add text here. |
| Short Name/Acronym(s) | Add text here. |
| Original script  Indicate script | Add text here.  [Click here to choose from a drop-down menu] Add text here. |
| Type | [Click here to choose from a drop-down menu] Add text here. |
| Additional information *(incl. dates)* | Add text here. |

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| **Registration and other identification numbers** | Number | Add text here. |
| Type | [Choose here] |
| Issuing authority | Add text here. |
| Other numbers *(indicate details as above)* | Add text here. |
| **Registered Address** | Current | Add text here. |
| Previous, if any | Add text here. |
| **Date of establishment** *(DD/MM/YYYY)*  Additional information | | DD/MM/YYYY  Add text here. |
| **Place of establishment** | | Add text here. |
| **State(s) of main activity** | | Add text here. |
| **Address(es) in state(s) of main activity** | | Add text here. |

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| **I.B - OTHER IDENTIFYING INFORMATION**  *Requesting State is asked to provide the following information in order to facilitate the identification of the entity concerned.* |

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| **Type of entity** | | | [Click here to choose from a drop-down menu] Add text here. |
| **Nature of business or activity** | | | [Click here to choose from a drop-down menu] Add text here. |
| **Location** | | **Current** | Add text here. |
| **Previous** *(add dates)* | Add text here. |
| **Branches / subsidiaries** | | | Add text here. |
| **Parent company** | | | Add text here. |
| **Leadership and management**  *(use annex A to report details)* | | | Add text here. |
| **Organizational linkages** | | | Add text here. |
| **Known assets / location of assets / patterns of provision** | | | Add text here. |
| **Known bank accounts / BIC / SWIFT / IBAN codes** *(if possible)* | | | Add text here. |
| **Status** | In liquidation / suspended / terminated / operating license withdrawn | | Yes  No  ….Not Known  If yes, please explain: Add text here. |
| Operating under caretaker or equivalent | | Yes  No  ….Not Known  If yes, please explain: Add text here. |
| Banned/illegal/clandestine | | Yes  No  ….Not Known  If yes, please explain: Add text here. |
| Other | | Please explain: Add text here. |
| **Relevant INTERPOL Notices** | | | Yes  No  ….Not Known  If yes, please explain: Add text here. |

| **I.C – OTHER IDENTIFYING INFORMATION NOT SPECIFIED ABOVE** |
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| Add text here. |

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| **II. BASIS FOR FREEZING OF ASSETS IN FRANCE** | |
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| **Nature of the asset freezing measure implemented in the requesting State** | Judicial  Administrative |
| **Status of the asset freezing** | Current  Ended |
| **Facts indicating the potential threat represented by the entity** *(criminal record, involvment in terrorist projects,…)* | Add text here. |
| **Presence of assets of the entity in France** | Yes  No  ….Not Known  If yes, please explain: Add text here. |

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| **III. STATEMENT OF CASE**  *The Statement of Case should provide as much detail as possible on the basis(es) for freezing of assets, including: (i) information on specific measures of asset freezing adopted by the requesting State (the nature of the measure of the terrorist asset freezing has to be either judicial or administrative); (ii) information on the threat represented by the entity, including threat emanating from its potential future activities; and (iii) information on existing assets in France.*  *Requesting State should regularly update France on the effectiveness of its national measure of asset freezing related to the entity proposed for listing in France.* |

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| **III.A STATEMENT OF CASE (RELEASABLE UPON REQUEST)** |
| Add text here. |

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| **III.B PARTS OF STATEMENT OF CASE IDENTIFIED AS BEING CONFIDENTIAL AND NOT RELEASABLE UPON REQUEST** |
| Add text here. |

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| **IV. 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) | | |
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| *Name:* Add text here. | | *Position/Title:* Add text here. |
| *Contact details:* | Add text here. | |
| *Office:* | Add text here. | |
| *Address:* | Add text here. | |
| *Telephone number:* | Add text here. | |
| *Fax number:* | Add text here. | |
| *E-mail address:* | Add text here. | |

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| **ANNEX A – Information about leadership and management** |

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

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| **Manager, member of the leadership or other affiliate of the entity** |

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| **Full name**  *(in Latin alphabet, as to appear on the List)* | | Add text here. |
| **Describe**  **name components**  *(Please describe each part of the name as first, middle or family name, et cetera)* | **Name components** *(between 1 to 4)* | **Component description** |
| 1. Add text here. | [Click here to choose from a drop-down menu] Add text here. |
| 2. Add text here. | [Click here to choose from a drop-down menu] Add text here. |
| 3. Add text here. | [Click here to choose from a drop-down menu] Add text here. |
| 4. Add text here. | [Click here to choose from a drop-down menu] Add text here. |
| **Spelling variations or other transliterations if used in official documents** | | Add text here. |
| **Original script**  *(as to appear on the List)* | **Indicate script: [Click here to choose]**  If other, which: Add text here. | Add text here. |
| **Other script(s)** *(if used officially)* | **Indicate script: [Click here to choose]**  If other, which: Add text here. | Add text here. |
| **Date of birth** | *(DD/MM/YYYY)*  Additional information | DD/MM/YYYY  Add text here. |
| **Place of birth** *(city/area/country)* | | Add text here. |
| **Alternative dates or places of birth** *(please explain)* | | Add text here. |
| **Male / Female** | | Add text here. |
| **Nationality or citizenship(s)** | Current | Add text here. |
| Previous *(add dates)* | Add text here. |
| **State(s) of residence** | Current | Add text here. |
| Previous *(add dates)* | Add text here. |

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| **Position or role in the entity** | [Click here to choose from a drop-down menu.]Add text here. |
| **Any additional information** *(background on alias)* | Add text here. |