

NORTHUMBERLAND

Northumberland County Council

Corporate Fraud Team

Report of Suspected Money Laundering

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PRIVATE AND CONFIDENTIAL

Report to Money Laundering Reporting Officer

Re: money laundering activity

To: Section 151 Officer

Northumberland County Council - Money Laundering Reporting Officer

From:

[insert name of employee]

Division:..... Ext/Tel No:.....

[insert post title and section]

DETAILS OF SUSPECTED OFFENCE

Name(s) and address(es) of person(s) involved:
[if a company/public body please include details of nature of business]

Nature, value and timing of activity involved:
[Please include full details e.g. what, when, where, how. Continue on a separate sheet if necessary]

Nature of suspicions regarding such activity:
[Please continue on a separate sheet if necessary]

Has any investigation been undertaken (as far as you are aware)?

[Please delete as appropriate] Yes / No

If yes, please include details below:

Have you discussed your suspicions with anyone else?

[Please delete as appropriate] Yes / No

If yes, please specify below, explaining why such discussion was necessary:

Have you consulted any supervisory body guidance re money laundering? (e.g. the Law Society)

[Please delete as appropriate] Yes / No

If yes, please specify below:

Do you feel you have a reasonable excuse for not disclosing the matter to the NCA? (e.g. are you a lawyer and wish to claim legal professional privilege?) [Please delete as appropriate] Yes / No

If yes, please set out full details below:

Are you involved in a transaction which might be a prohibited act under sections 327-329 of the Act and which requires appropriate consent from the NCA?
[Please delete as appropriate] Yes / No
If yes, please enclose details in the box below:

Please set out below any other information you feel is relevant:
(Continue on a separate sheet if necessary)

Signed:.....
Dated:.....

Please do not discuss the content of this report with anyone you believe to be involved in the suspected money laundering activity described. To do so may constitute a tipping off offence, which carries a maximum penalty of 5 years' imprisonment.

THE FOLLOWING PART OF THIS FORM IS FOR COMPLETION BY THE MONEY LAUNDERING REPORTING OFFICER

Date report received:

Date receipt of report acknowledged:

CONSIDERATION OF DISCLOSURE:

Action plan:

OUTCOME OF CONSIDERATION OF DISCLOSURE:

Are there reasonable grounds for suspecting money laundering activity?

If there are reasonable grounds for suspicion, will a report be made to the NCA? [Please delete as appropriate] Yes / No

If yes, please confirm date of report to NCA:

.....

and complete the box below:

Details of liaison with the NCA regarding the report:

Notice Period: to

Moratorium Period: to

Is consent required from the NCA to any on-going or imminent transactions which would otherwise be prohibited acts?
[Please delete as appropriate] Yes / No
If yes, please confirm full details in the box below:

Date consent received from NCA:
.....
Date consent given by you to employee:
.....

If there are reasonable grounds to suspect money laundering, but you do not intend to report the matter to the NCA, please set out below the reason(s) for non-disclosure:

Date consent given by you to employee for any prohibited act transactions to proceed:
.....

Other relevant information:

Signed:.....
Dated:.....

THIS REPORT TO BE RETAINED FOR AT LEAST FIVE YEARS