

# EXPLANATORY NOTES FOR THE STANDARD FORM FOR LISTING INDIVIDUALS

*Fields that are not completed will be omitted from the information concerning the entry on the List.*

**Note:** In the advanced version of the form, drop-down menus are available for many fields.

## **I.A - IDENTIFYING INFORMATION THAT WILL APPEAR ON THE CONSOLIDATED LIST**

Member States are requested to provide the Committee with as much relevant information as possible, in particular sufficient identifying information to allow for the accurate and positive identification of the individual concerned.

- **Full name:** Legal name of the individual in full and in Latin script as determined by the State's naming convention; apostrophes and hyphens should be included.
- **Describe name components:** First, please break down the full name into its parts and use a separate line under "Name components" for each part, starting with first name. Second, please describe each part of the name using one of the following categories: first name, second name, middle name, family or last name, father's name, grandfather's name, great-grandfather's name, mother's name, tribal reference, geographic reference, honorific or religious title. If the name component does not fit any of these descriptions, please choose "other" and describe in writing the category of the name component. **NOTE:** The aim of this section is to ensure that each part of the full name is accurately identified regardless of national naming conventions, so that, for example, last names are not mistaken for first names and vice versa, which affects the accuracy of matching the names located by Member States to the names on the Consolidated List.
- **Spelling variations or other transliterations if used in official documents:** Other official spellings or transliterations of names of the individual in full and in Latin script; apostrophes and hyphens should be included.
- **Original script:** Provide the entire name in original script. The type of script needs to be indicated by choosing from among the following descriptions: Arabic, Chinese, Dari, Farsi, Pashtu, Russian, or Urdu (names in these scripts already appear on the Consolidated List). If the original script is not among these scripts, please choose the option "other" and describe the type of script in writing.
- **Other script(s):** If applicable, the name may be presented in multiple scripts where pertinent. Please indicate which script(s) is used (if other, provide in parenthesis after the name).
- **Male/Female:** Indicate which gender.
- **Date of birth:** Provide the date in DD/MM/YYYY format (the internationally accepted civil calendar), followed by the date in national calendar if different. If date of birth is approximate, assigned administratively or there are other additional details that must be taken into consideration, please report this information in the space provided.
- **Place of birth:** Provide name of the place of birth, including village, town or city; district, region, province, or state; and country.
- **Alternative dates or places of birth:** Provide alternative date(s) or place(s) of birth if applicable using same formats as above.
- **Nationality/citizenship(s):** Current, followed by previous nationality and/or citizenship, if any. For previous, or new citizenship(s), add date when granted, revoked, annulled, withdrawn or when this status has otherwise been altered.
- **State of residence(s):** Please indicate current state of residence(s) if different from nationality and date(s) of residence. Add previous state(s) of residence, if any, and provide the date(s) when granted, revoked, annulled, withdrawn or when this status has otherwise been altered.

### **Passport(s), other travel documents and national identification documents**

- **Document type:** Describe the document type, for example: passport, driver license, national identity card, birth certificate, or social security card. If document is of other type, please describe in writing.
- **Document number:** Please provide document number.
- **Name issued in original script:** Where applicable, provide name under which the document has been issued if it is in non-Latin script (or different from the name being proposed for listing under "Full name"), and indicate type of script.

- **Issued by:** Describe issuing authority, for example regional or national authority.
- **Issue date:** Provide the date of issue in DD/MM/YYYY format (the internationally accepted civil calendar), followed by the date in national calendar if different.
- **Expiry date:** Provide the date of expiry in DD/MM/YYYY format (the internationally accepted civil calendar), followed by the date in national calendar if different.
- **Additional information:** Pertinent details not falling in any of the categories above, for example, if the passport or travel document was revoked before its expiry date but still held by the individual.
- **NOTE:** Please provide copies of all documents where possible. To provide information about additional documents, please fill in annex A.

#### **Aliases/ Also-Known-As**

- Please fill in annex B if the individual has aliases/also-known-as names, both current and formerly used. Provide this information only if the data is sufficient to allow for the accurate and positive identification of the individual concerned
- For nickname or other pseudonym not sufficient for accurate and positive identification please use the relevant field in section I.B of the standard form and/or annex C.

### **I.B - OTHER IDENTIFYING INFORMATION THAT MAY ALSO APPEAR ON THE CONSOLIDATED LIST**

Member States are requested to provide the following information in order to facilitate the identification of the individual concerned.

#### **Nicknames, diminutives and other pseudonyms**

- Provide in this field all possible *noms de guerre*, nicknames and other informal pseudonyms that are not by themselves sufficient for positive identification of the individual concerned (meaning those names that are not legal names sufficient for positive identification).
- **Type:** Indicate the type of pseudonym, for example *nom de guerre*, nickname, or adopted name. If the entry is of other type, please describe in writing.
- **Details:** Provide the nickname or other pseudonym in Latin script.
- **Additional information about this pseudonym:** Include original or other script(s) (indicate which scripts in parenthesis after each entry), where applicable, along with any other pertinent details.
- **Title(s):** Honorary, professional, religious, academic or other title or hereditary status, current or last held.
- **Employment/Occupation:** Position(s) held, types of employment or professional qualification(s), former positions held (in particular if in listed entities), if available.
- **Marital status:** Indicate whether the individual is married and/or has spouse(s) or children. Designating States are encouraged to provide the spouse(s)'s name(s) in both Latin and original script, if applicable and relevant to activities under sections II or III, or helpful for the purposes of sanctions implementation. This/these name(s) will NOT be added to the List unless so specified by the designating State(s). However, it/they may be released to other Member State(s) and INTERPOL upon request unless otherwise specified by the designating State(s).
- **Address – Primary address:** Provide current or domicile address, including for correspondence, and also provide, as far as possible: apartment or house number(s); street, village, town or city; district, region, province or state; country; and postal or zip code. Please provide dates where known.
- **Address – Other addresses:** Provide previous permanent or temporary residence(s) with dates where known.
- **Location - Current:** List operational areas or frequented locations that are not domiciles, if different from address.
- **Location - Alternative:** List operational areas or frequented locations that are not domiciles, if different from current location or addresses.

#### **Status**

- **Wanted / Subject to arrest warrant:** Indicate whether individual is wanted, subject to an arrest warrant or indicted.

- **Detained:** Indicate whether individual is in detention, custody, or prison. If possible, please provide the date, location and circumstances of detention, and the date of likely release.
- **Convicted/Sentenced:** Indicate whether the individual has been convicted, sentenced or has any other relevant legal status and provide explanation. Please provide details on sentence *inter alia* name and location of the court, type of offense, details and date of the judgment, whether an appeal has been filed, and the date of likely release or other foreseeable consequences such as deportation or extradition proceedings.
- **Others:** Please provide information on any legal action taken by or against the individual concerned including previous incarcerations and/or deportations or release from prison or if the individual is at large or fugitive. Please also indicate if the individual is reportedly deceased and the date and place or location of demise, if known.
- **Relevant INTERPOL notices:** Indicate if there are any INTERPOL notices issued for the individual at the request of your authorities. Please also specify if the information stated herein can be revealed and/or released publicly or provided to a Member State(s) upon request.
- **Other supplementary information:** Supplementary information relevant to the identification, whereabouts and/or the activities of the individual.

### Names of parents

- **Father's name:** Full details of father's name in both Latin and original scripts, if applicable. This name will NOT be added to the List if the designating State(s) so specifies. However, it may be released to other Member State(s) and INTERPOL upon request unless otherwise specified by the designating State(s).
- **Mother's name:** Full details of mother's name in both Latin and original scripts, if applicable. This name will NOT be added to the List if the designating State(s) so specifies. However, it may be released to other Member State(s) and INTERPOL upon request unless otherwise specified by the designating State(s).

### Residency permits, visas or similar official documents

- Include current and any previous residency permits, visas or other official documents issued. To provide additional documents, please fill in as many copies of annex A as required.
- **Document type:** Describe the document type, for example: residency permit, work permit, or alien registration card. If document is of another type, please describe in writing.
- **Document number:** Please provide document number.
- **Original script:** Where applicable, if issued in non-Latin script, please include the name as given in the individual's passport and indicate the type of script.
- **Issued by:** Indicate the issuing authority, for example national, regional or local authorities.
- **Issue date:** Date of issue in same format as other dates above (DD/MM/YYYY).
- **Expiry date:** Expiry date in same format as other dates above (DD/MM/YYYY).
- **NOTE:** Please provide copies of all documents where possible.

### Other identity documents

- Include current and any previous identification documents issued not listed in previous category. To provide additional documents, please fill in as many copies of annex A as required.
- **Document type:** Describe the document type in writing, for example employee card.
- **Document number:** Please provide document number.
- **Issued by:** Indicate the issuing authority, for example national, regional or local authorities.
- **Issue date:** Date of issue in same format as other dates above (DD/MM/YYYY).
- **Expiry date:** Expiry date in same format as other dates above (DD/MM/YYYY).
- **NOTE:** Please provide copies of documents where possible.

### Official identity number

- Include the most relevant official number that may help to identify or implement sanctions against the individual.

- **Type:** Describe the type of the identity number, for example: social security number, alien registration number, employee number, national identity number, tax identification number or customer identification number. If the number is of other type, please describe in writing.
- **Number:** Please provide the identity number.
- **Issued by:** Indicate the issuing authority, for example national, regional or local authorities.
- **Other details:** Please provide any other relevant details.

### **Other numbers**

- Include all other relevant official numbers that may help to identify or implement sanctions against the individual, indicating type, issuing authority and other pertinent details as above.

### **I.C – PHYSICAL DESCRIPTION**

These details may be used for the issuance of an INTERPOL-United Nations Security Council Special Notice.

- **Height/Weight/Build:** Height in centimeters (indicate whether approximate), weight in kilograms, and description of body structure and build.
- **Hair & Eye Color / Complexion:** Describe these physical attributes, where known.
- **Tribal / Ethnic Background:** Describes relevant tribal, clan and/or ethnic background.
- **Photograph, Sketch, Computer Image:** Attach where available.
- **Other Biometric Identifiers:** For example fingerprints, DNA code, or iris scan.
- **Distinguishing Marks and Other Physical Characteristics:** Any distinctive physical attributes, if known, that may help to identify the individual. May include for example physical damage incurred (scars, missing fingers), tattoos or deformities.
- **Languages Spoken:** Languages in which the individual is known to converse (please indicate whether native, fully competent or limited skills).
- **Additional physical characteristics:** Include any other details that may facilitate the positive identification of the individual.

### **I.D – OTHER IDENTIFYING INFORMATION NOT SPECIFIED ABOVE**

- Include any other relevant details that may facilitate the identification of the individual.

### **II – BASIS FOR LISTING**

- Member States are requested to indicate in one or more of the fields below the nature of the association between the individual inscribed in section I.A of this form and Al-Qaida, Usama bin Laden and/or the Taliban as set out in paragraphs 2 and 3 of resolution 1617 (2005) and subsequent resolutions. Full explanations and details of the nature of this association should be given in Part III of this form (Statement of Case). Please include the permanent reference number(s) of those names which the individual is associated with that already appear on the Consolidated List.
- In the event of the designation of this individual by the Committee, the information provided will be used for the development of the narrative summary of reasons for listing to be published on the Committee's website in accordance with paragraph 14 of Security Council resolution 1904 (2009).

### **III – STATEMENT OF CASE**

- The Statement of Case should provide as much detail as possible on the basis(es) for listing, including: (i) specific information supporting a determination that the individual meets the criteria above; (ii) the nature of the information, for example, intelligence, law enforcement, judicial, media, and admissions by subject; and (iii) additional information or documents provided with the submission. States should include details of any connection between the individual proposed for listing and any currently listed individual or entity.<sup>1</sup>
- In accordance with paragraph 11 of resolution 1904 (2009), the whole statement of case (in field III.A) shall be releasable, upon request, except for the parts a Member State identifies as being confidential to

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<sup>1</sup> Resolution 1735 (2006), para. 5.  
Ver. 17 Dec 09

the Committee (using field III.B), and may be used to develop the narrative summary of reasons for listing described in paragraph 14 of resolution 1904 (2009).

#### **IV – IDENTITY OF DESIGNATING STATE**

- In accordance with paragraph 12 of resolution 1904 (2009) Member States proposing a new designation are encouraged to specify whether the Committee may make known, upon request from a Member State, the Member State’s status as a designating State. They may do so by selecting either the “yes” or “no” check box in this section.

#### **V – INTERPOL COOPERATION**

- The Security Council stressed in resolution 1699 (2006) that its sanctions measures are often implemented under national law, including criminal law where applicable, and that enhanced cooperation between the United Nations and INTERPOL would enhance States’ enforcement of those laws. In the same resolution, the Security Council encouraged Member States to use the tools offered by INTERPOL to reinforce the implementation of mandatory measures adopted by the Security Council, particularly the freezing of assets, travel bans, and arms embargoes. In this connection, the Committee regularly requests INTERPOL to issue INTERPOL-United Nations Security Council Special Notices to alert national law enforcement authorities in INTERPOL member countries that designated individuals and entities are subject to Security Council sanctions.
- INTERPOL may, for implementation purposes, wish to contact the relevant authorities in your country, with a view to obtaining additional information on the individual(s) proposed for designation herewith. For this purpose, please indicate if the Committee may inform INTERPOL, upon INTERPOL’s request, that your country is a designating State of the above-mentioned individual(s). INTERPOL may then contact your country’s permanent mission to the United Nations in New York with the relevant inquiries.
- In addition, please indicate if the Committee may convey to INTERPOL, upon INTERPOL’s request, the details of the above point of contact within your Government so that INTERPOL may then contact directly the contact point with the relevant inquiries.

#### **VI – POINT OF CONTACT**

- Please provide contact details of the individual(s) who will serve as a point-of-contact for your Government for further questions on this submission.

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# EXPLANATORY NOTES FOR THE STANDARD FORM FOR LISTING ENTITIES

*Fields that are not completed will be omitted from the information concerning the entry on the List.*

**Note:** In the advanced version of the form, drop-down menus are available for many fields.

## **I.A - IDENTIFYING INFORMATION THAT WILL APPEAR ON THE CONSOLIDATED LIST**

Member States are requested to provide the Committee with as much relevant information as possible, in particular sufficient identifying information to allow for the accurate and positive identification of the entity concerned.

- **Full Name:** Full name of entity in Latin script according to official documents.
- **Spelling variations or other transliterations if used in official documents:** Other official spellings or transliteration of names of the entity in full and in Latin Script; apostrophes and hyphens should be included.
- **Original Script:** The entire name in original script. The type of script needs to be indicated as, for example: Arabic, Chinese, Dari, Farsi, Pashtu, Russian, or Urdu (names in these scripts already appear on the Consolidated List). If the original script is not among these, please choose the option “other” and describe in writing.
- **Other script(s):** If applicable, the name may be presented in multiple scripts where pertinent (indicate which script(s) used in parenthesis after the name).
- **Short Name/Acronym(s):** Short names and acronyms in Latin script according to how the name(s) appear(s) on official documents, where applicable.

### **Alias, also-known-as, formerly-known-as**

- **Details:** Provide the alias in the Latin script. As a priority, please provide both former and current aliases / also-known-as names that allow for accurate and positive identification of the entity concerned. These include formerly-known-as (FKA). Informal aliases, including pseudonyms and names or functional names not legally registered, should be clearly identified as such.
- **Original Script:** Provide the entire name in original script. The type of script needs to be indicated by choosing from among the following descriptions: Arabic, Chinese, Dari, Farsi, Pashtu, Russian, or Urdu (names in these scripts already appear on the Consolidated List). If the original script is not among these scripts, please choose the option “other” and describe the type of script in writing.
- **Type:** Indicate the type of alias, for example also-known-as, formerly-known-as, previous legal name or previous registered name. If other, please choose the option “other” and describe in writing.

### **Registration number and other identification numbers**

- Registration number or equivalent of concerned entity; date of registration; place of registration and State registration authority. Please indicate the type of identification number as business registration number, tax identification number, employer number, social security number or other (if other, please describe in writing).
- **Registered Address – Current:** Full legal/official and physical address(es), and correspondence address(es). Specify whether address(es) refers to the whole entity or to its headquarters, subsidiaries, affiliates or front offices.
- **Registered Address –Previous:** Previous address(es), with dates where known.
- **Date of establishment:** Provide the date in DD/MM/YYYY format (the internationally accepted civil calendar), followed by the date in national calendar if different. If date of establishment is approximate, assigned administratively or there are other additional details that must be taken into consideration, please report this information in the space provided.
- **Place of establishment:** Provide name of the place of establishment, including village, town or city; district, region, province, or state; and country.
- **State(s) of main activity:** Please provide details if different from registered address.
- **Address in State(s) of main activity:** Full legal, official and/or physical address(es), and correspondence address(es). Specify whether address(es) refers to the whole entity or to its headquarters, subsidiaries, affiliates or front offices.

- **Please state any specific limitations that may be relevant to the sanctions implementation:** Sanctions are to be implemented by all Member States within their jurisdiction against the entity unless otherwise stated, for example regarding the case of the Revival of Islamic Heritage Society (RIHS) (QE.R.70.02) where the Consolidated List states: “NOTE: Only the Pakistan and Afghanistan offices of this entity are hereby designated”. The designating State(s) should indicate if there are any such limitations or specifications regarding the sanctions implementation in this field.

#### **I.B - OTHER IDENTIFYING INFORMATION THAT MAY ALSO APPEAR ON THE CONSOLIDATED LIST**

Member States are requested to provide the following information in order to facilitate the identification of the entity concerned.

- **Type of entity:** Please describe type of the entity as registered company or business, unregistered company or business, registered non-profit organization, unregistered non-profit organization, registered group or affiliation, unregistered group or affiliation, illegal or armed group, or criminal group. If none of these are applicable, please choose the option “other” and describe in writing.
- **Nature of business or activity:** Indicate in detail the activity(ies) the entity is engaged in, in particular its main activity or business, for example: criminal, political, charity or humanitarian, bank, informal or alternative remittance, money wire or exchange, Internet or telecommunications, media, trust or financing, legal estate, paramilitary, training or recruitment. If none of these are applicable, please choose the option “other” and describe in writing.
- **Location - Current:** Current areas or locations where the entity operates, may be located, or otherwise may be found.
- **Location - Previous:** Previous areas or locations where the entity operated or was located, with dates.
- **Branches or subsidiaries:** List branches and subsidiaries and specify if all or only part of the entity is being submitted for designation. Use annex B to report details.
- **Parent company:** Provide information about parent company or network. Please specify if the parent company or part of the parent company of the entity is being submitted for designation. Use annex B to report details.
- **Leadership and Management:** List and describe the individuals in leadership and/or management positions within the entity. If they appear on the Consolidated List, provide the relevant permanent reference numbers. Use annex C to report details. **Note:** If these individuals are also submitted for listing or intended to be subjected to the sanctions, provide separate listing request(s) in the standard form for individuals.
- **Organizational Linkages:** List and describe parent, sister, subsidiary companies or organizations, or groups with which the entity has carried out joint recruitment, operations, training, planning or shared military technical information. This information will NOT be added to the List if the designating State(s) so specifies. However, it may be released to other Member State(s) and INTERPOL upon request.
- **Known assets, location of assets or patterns of provision:** Please describe type, amount and location of known assets of the entity and/or how assets are provided to the entity, and whether intercepted/frozen.
- **Known bank accounts / BIC / SWIFT / IBAN codes:** If possible, please describe known bank account information or relevant BIC, SWIFT and IBAN codes that may be helpful in the implementation of the sanctions measures.
- **Status:** Please indicate if the entity is in liquidation, suspended, terminated, has had its operating license withdrawn; operating under caretaker, or equivalent; banned, illegal or clandestine; if none of these are applicable, choose the option “other”. Please provide detailed information on any legal action taken by or against the entity concerned.
- **Relevant INTERPOL Notices:** Please indicate if there are any INTERPOL notices issued for the entity at the request of your authorities. Please also specify if the information stated herein can be revealed and/or released publicly or provided to a Member State(s) upon request.

#### **I.C – OTHER IDENTIFYING INFORMATION NOT SPECIFIED ABOVE**

- Other supplementary information relevant to the identification, whereabouts and /or the activities of the entity.

## **II – BASIS FOR LISTING**

- Member States are requested to indicate in one or more of the fields below the nature of the association between the entity inscribed in section I.A of this form and Al-Qaida, Usama bin Laden and/or the Taliban as set out in paragraphs 2 and 3 of resolution 1617 (2005) and subsequent resolutions. Full explanations and details of the nature of this association should be given in Part III of this form (Statement of Case). Please include the permanent reference number(s) of those names which the entity is associated with that already appear on the Consolidated List.
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## **III – STATEMENT OF CASE**

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- In accordance with paragraph 11 of resolution 1904 (2009), the whole statement of case (in field III.A) shall be releasable, upon request, except for the parts a Member State identifies as being confidential to the Committee (using field III.B), and may be used to develop the narrative summary of reasons for listing described in paragraph 14 of resolution 1904 (2009).

## **IV – IDENTITY OF DESIGNATING STATE**

- In accordance with paragraph 12 of resolution 1904 (2009) Member States proposing a new designation are encouraged to specify whether the Committee may make known, upon request from a Member State, the Member State's status as a designating State. They may do so by selecting either the "yes" or "no" check box in this section.

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- INTERPOL may, for implementation purposes, wish to contact the relevant authorities in your country, with a view to obtaining additional information on the entity(ies) proposed for designation herewith. For this purpose, please indicate if the Committee may inform INTERPOL, upon INTERPOL's request, that your country is a designating State of the above-mentioned entity(ies). INTERPOL may then contact your country's permanent mission to the United Nations in New York with the relevant inquiries.
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