

## Web banking and mobile banking application form for legal entities

PLEASE FILL IN THE APPLICATION WITH CAPITAL LETTERS AND MARK WITH "X" WHERE NECESSARY

### TYPE OF APPLICATION

<input type="checkbox"/> Web banking <input type="checkbox"/> Initial registration <input type="checkbox"/> User type alteration <input type="checkbox"/> Alteration of application form <input type="checkbox"/> Issuing password/kibs certificate <input type="checkbox"/> Deactivating registration	<input type="checkbox"/> Mobile banking <input type="checkbox"/> Renewal of kibs certificate <input type="checkbox"/> Blocking due to lost password/kibs certificate <input type="checkbox"/> Reissuing of kibs certificate <input type="checkbox"/> Alteration of authorizer/initiator
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### LEGAL ENTITY

Company name \_\_\_\_\_ Address \_\_\_\_\_  
 Bank account \_\_\_\_\_ Legal entity ID number \_\_\_\_\_ Tax number \_\_\_\_\_  
 E-mail \_\_\_\_\_ Telephone \_\_\_\_\_ Telephone 2/fax \_\_\_\_\_

### INFORMATION ABOUT THE PERSON WHO IS AUTHORIZED FOR WEB/MOBILE BANKING

Name \_\_\_\_\_ Surname \_\_\_\_\_ Date of birth \_\_\_\_\_ Personal ID number \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Postal \_\_\_\_\_ e-mail \_\_\_\_\_  
 Telephone \_\_\_\_\_ Mobile telephone \_\_\_\_\_

**\*With the application the above user gets permission for:**

Passive – for review of account balances  Active – for performance of transactions

**\*Authorization to sign an order:**

No limit on the amount of the order  Sign independently  
 Maximum order amount \_\_\_\_\_  Signs collectively with \_\_\_\_\_

**By signing the present application form for web banking/mobile banking I hereby declare that:**

- I have been duly informed of and have unconditionally accepted the general terms and conditions for using the web banking/mobile banking service.
- I shall inform the bank immediately in case of any change in the details provided above.
- I am fully responsible for all actions, performed on my behalf after having been granted access to the web banking/mobile banking service.
- I am fully aware that I bear material and criminal responsibility regarding the validity of the stated information.
- I agree that my personal data listed in this application be registered, processed, updated for the needs of the bank and if necessary the bank transfers my personal data to other countries, EU or EU countries or other non-EU countries eu or eea members, upon prior approval for the transfer of personal data by the Directorate for Personal Data Protection.
- I know that the above data is a business secret under the Banking Law and other applicable legislation.
- The Bank reserves the right to request other data about the client for the purposes of the established business relationship.
- The bank reserves the right to terminate the business relationship with the client at any time
- I know the conditions for establishing a business relationship with the bank and I fully accept them

**By filling in the application form I hereby declare that:**

- I agree to the stated mobile phone number and e-mail address listed for the person authorized for electronic banking to be used for delivery of a combination of username and activation code in accordance with the needs of the technical solution for the services.  
 I agree that the person I authorize can access the electronic banking services from all available channels that the bank provides and activates.

**By filling in the application form I hereby declare that:**

- I agree to be contacted by the bank about promotional offers for the services of third parties on the contact information stated in the form.  
 I do not agree to be contacted by the bank about promotional offers for the services of third parties on the contact information stated in the form.  
 I agree to be contacted by the bank about promotional offers for its services on the contact information stated in the form.  
 I do not agree to be contacted by the bank about the bank promotional offers for its services on the contact information stated in the form.

### THIS PART IS FILLED IN BY THE BANK

Date	Branch	Responsible person of the Bank

Signature and stamp of  
Company's authorized persons

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