



REQUEST FOR ESTABLISHMENT / UPDATE OF A BUSINESS RELATIONSHIP

Pursuant to the current Anti Money Laundering and Terrorism Financing Act, the Bank is obligated to collect the following data and documents.

1. ENTITY DETAILS				
Name:				
Entity's taxpayer ID number (OI	B):			
Head office address (street, hou	use number, city, country):			
Mailing address (street, house i	number, city, country):			
Entity Register Number (State E	Bureau of Statistics):	Main business activity (description):		
2. OWNER DETAILS				
Name and surname:			Date of birth:	
Citizenship/(s):				
Mobile phone:	Telephone:	E-mail:		
Permanent residence address (street and house number, city a	nd postal code, count	ry):	
Identification document: □ Personal identity card		Identification document's no.:		
☐ Passport ☐ Residence permit		Identification document issued by:		
3. ADDITIONAL CONTACT PER	SONS	1		
Name and surname:		Name and surname:		
Telephone:		Telephone:		
Mobile phone:		Mobile phone:		
E-mail:		E-mail:		
4. THE BANK IS PURSUANT TO THE ANTI MONEY LAUNDERING AND COUNTER TERRORISM FINANCING ACT OBLIGATED TO COLLECT DATA FOR CLIENT DUE DILIGENCE PURPOSES. PLEASE ANSWER THE QUESTIONS BELOW:				
Purpose of establishing a business relationship with the Bank: opening a transaction account / establishment of a business relationship data update				
5. ACCORDING TO THE DECISION ON THE MANNER OF OPENING TRANSACTION ACCOUNTS, PLEASE CHECK THE TYPES OF TRANSACTION ACCOUNTS YOU REQUEST TO BE OPENED*:				
Regular business account: EUR in foreign currency - please specify foreign currencies:				
Other account defined by law (e.g. Execution-exempt account, special-purpose account) – please specify the law based on which the account is opened: EUR				
Account of an organisation unit of the used (please specify): EUR in foreign currency - please specify foreign currencies:				
Other account (special-purpose account for the collection of joint budget income, budget account, account of other payment				
service providers) EUR in foreign currency - please specify foreign currencies:				
*To be filled in only when establishing a business relationship 6. WHAT KIND OF TRANSACTIONS THROUGH ACCOUNTS HELD WITH THE OTP BANK WILL BE PERFORMED?				
a) cash transactions	☐ b) domestic cash	_	c) savings and investment	
☐ d) cross border payments	☐ e) credit operatio	ons	f) documentary operations	
☐ g) other Please indicate other:				

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6a. SPECIFY THE EXPECTED A	AUNN	L AMOUNT OF CASH PAY	MENTS, EXCLUDING	G CASH TAKI	NGS:	
6b. SPECIFY THE EXPECTED A	NNUA	L AMOUNT OF CASH WIT	HDRAWALS:			
6c. WHAT IS THE PURPOSE OF	ANNO	OUNCED CASH TRANSAC	TIONS?			
6d. SPECIFY THE EXPECTED A	NNUA	L CROSS-BORDER TRAN	SACTIONS (INFLOW	S AND OUTF	LOWS):	
			•		,	
6e. WITH WHICH COUNTRIES THE CROSS-BORDER TRANSACTIONS WILL TAKE PLACE? 7. WHAT IS EXPECTED ANNUAL INFLOW ON ACCOUNTS HELD WITH THE OTP BANK?						
☐ a) up to 70.000,00 EUR	□ b)	☐ b) up to 140.000,00 EUR ☐ c) up to 270.00			☐ d) up to 700.000,00 EUF	₹
☐ e) up to 1.000.000,00 EUR	☐ f)	f) up to 1.400.000,00 EUR		00,00 EUR	☐ h) up to 4.700.000,00 El	JR
☐ i) up to 6.700.000,00 EUR		」j) up to 13.500.000,00 EUR				
8. SOURCE OF FUNDS SUBJEC						
9. DO YOU WORK OR INTEND	ro wc	ORK WITH VIRTUAL CURR	ENCIES (YES/NO)?			
10. NUMBER OF EMPLOYEES:						
11. PAYMENT TRANSACTIONS Bank FINA (bra			ng a transaction acco	ount or chang	ging the existing method):	
12. METHOD OF RECEIVING IN			LANCE AND TURN	OVER: (to be	filled in only when opening	ја
transaction account or changin	g the	existing method):				
STATEMENT OF ACCOUNT:						_
		BANK		□ £le	FINA	4
e-mail (.pdf):		Specify e-mail Specify e-mail		☐ file		
file:		speeny e man		☐ FINA e-pa	ayment	1
☐ HUB format (.txt)*		Specify e-mail		☐ INFO FIN		
camt.053*		Specify e-mail		☐ FINA onli	ne	
☐ MT940 ☐ MT942		SWIFT: SWIFT:				
by mail to the entity's addre		Specify address		camt.053		-
by mail to another address:		Specify address		print-out in FINA branch		
print-out in BANK branch:		Specify branch		- Drink out in 1 nov branch		
Frequency of sending a statem	ent of	account:				-
upon any change		weekly	☐ 15 daily	*	☐ monthly	
						_
INVOICE FOR THE CALCULAT		<u>=E:</u>				4
e-mail (.pdf)		Specify which (possible n	nore)			-
G o maii (.pai)		openiy when (peccipie in	11010)			
☐ by mail to the entity's add		Specify which				
by mail to another addres	SS:	Specify which				_
e-Invoice**						
☐ Information on collected fees in foreign currency payment operations (monthly)						
□ e-mail (.pdf) Specify which (possible more)				1		
Delivery of statements and invoices for the calculated fee by OTP banka d.d. is not possible if the client performs payment transactions through FINA. * The frequency of sending FINA statements cannot be every 15 days, the frequency of sending HUB form and camt.053 form by the Bank can only be daily ** The format for receiving invoices for the calculated fee for public procurement companies can only be e-Invoice; other formats are not possible for contracting.						
Fees are charged in line with the Decision on Pricing 13. PLEASE SPECIFY BUSINESS PARTNERS*:						
Suppliers (name, registered office, country of registered office) Buyers (name, registered office, country of registered office)						
Taylor (mans, registros of regi					-,	
*if it is a newly established compan	y with	out a list of buyers/suppliers a	at the time of establish	ing a business	relationship, it is not necessary	, to

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14. APPLICATION FOR ISSUANCE	OF A VISA CLASSIC BUSIN	ESS DEBIT CARD		
Designated cardholder 1		Designated cardholder 2		
Name and surname:		Name and surname:		
Taxpayer ID number:	Date of birth:	Taxpayer ID number:	Date of birth:	
Mobile phone:		Mobile phone:		
Daily cash withdrawal cap*:		Daily cash withdrawal cap*:		
Daily spending cap*:		Daily spending cap*:		
Delivery of the card to the branch (specify):		Delivery of the card to the branch (specify):		
The PIN delivery address is the same as the head office address: ☐ YES ☐ NO		The PIN delivery address is the same as the head office address: ☐ YES ☐ NO		
PIN delivery address (street, house number, city, country):		PIN delivery address (street, house number, city, country):		
Signature:		Signature:		
*Daily cash withdrawal cap is set at EUR (600,00, and the daily spending cap	is set at EUR 1.400,00.		

Declaration

- I confirm that all information and statements made in this form are correct and complete to the best of my knowledge and belief. I confirm the details of each non-resident controlling person have been correctly indicated where applicable;
- I authorize the Bank to provide a copy of this confirmation, or any other information necessary for establishing my tax status to any competent tax authority, any authority empowered to audit or control the Bank for tax purposes as well as any legal entity belonging to OTP Group at the time of disclosure;
- I agree that any information contained in this confirmation including information on controlling persons and any
 information regarding his/her current and future financial account(s), including their balance(s) and income revenues
 transactions, may be reported to any authority to which the Bank is required to provide tax-related information;
- I agree that I will submit a new confirmation form to the Bank within 90 days if any information in this confirmation form changes or becomes incorrect, including information on controlling persons;
- I confirm to be aware of the General Terms & Conditions of Providing Payment Services to Non-Consumers, which I acknowledge and accept by my signature;
- I confirm that the management have been advised of and consent to the use of their personal data and accept the General Terms & Conditions of Providing Payment Services to Non-Consumers.

I certify that I am the Account Holder (or authorized to sign for the Account Holder) of all the accounts concerned by this form

form.			
I certify that I have c	apacity to sign for the Legal	Entity:	
Signature:		Name and surname:	
Capacity:	OWNER	Date (DD-MM-GGGG):	
REQUEST RECEIPT DA	ATA (to be completed by the	Bank)	
Request received on:			
Branch name:			
Employer's first and la	st name, signature:		

Data collected in this Request shall be considered a banking secret and treated by OTP banka d.d. according to the statutory data secrecy obligation.

Personal data collected in this document are mandatory for the Bank to be able to precisely identify and determine your tax status according to valid regulations. The Bank may use these data as well as those collected subsequently for business management purposes, in particular for risk management, incident and fraud prevention, know-your-client purposes and money laundering prevention.

Contact details of the client or contact persons (the client selects at least one of the offered communication channels of their own choice) are collected based on the assessment of the Bank's legitimate interest which is in balance with the data subject's rights and freedoms.

Principles and rules of personal data processing are regulated by the Bank's Data Privacy Policy regulates, which is publicly available on the Bank's web site www.otpbanka.hr as well as in all branch offices of the Bank at the data subject's request.

In addition, detailed Information on the Collection of Data and Information on the Collection of Data Not Obtained Directly from the Data are available on the Bank's website and in all branch offices of the Bank.