

APPLICATION FOR ASSIGNMENT/CHANGE OF PROFESSIONAL CLIENT STATUS

Riga,

_____ 20____

General information about the client

Name, Surname / name of the legal person	
Personal identity number (for residents of Republic of Latvia) or date of birth (for non-residents of Republic of Latvia)/ Registration number	Place of birth(country)/Country of registration, name of the register and date of registration
Phone number	
Address of place of residence / Registered office	
Client's representative (name, surname, identity number (for residents of Republic of Latvia) or date of birth (for non-residents of Republic of Latvia))	Authority of the Client's representative based on <input type="checkbox"/> Articles of association <input type="checkbox"/> Power of Attorney <input type="checkbox"/> _____
Personal identity document's series and number, country of issuance and issuing authority	Personal identity document's issue date

Please grant me:

<input type="checkbox"/> the status of professional client in respect of: <input type="checkbox"/> all investment services and ancillary investment services <input type="checkbox"/> the following investment services and ancillary investment services:	
<input type="checkbox"/> to all simple financial Instruments <input type="checkbox"/> Repo and Reverse Repo transactions <input type="checkbox"/> Forex transactions (marginal) <input type="checkbox"/> equities traded outside the regulated market <input type="checkbox"/> structured ETF (Exchange Traded Funds) <input type="checkbox"/> complex bonds inc., subordinate, perpetual	<input type="checkbox"/> Futures <input type="checkbox"/> transactions using a leverage <input type="checkbox"/> SWAP transactions <input type="checkbox"/> Options <input type="checkbox"/> Forward transactions <input type="checkbox"/> short selling of financial instruments

AS "PNB Banka" (hereinafter to be referred to as the Bank) informs that, when providing investment services and ancillary investment services to the client to whom a private client status is assigned, the Bank uses the highest level of protection of the interests of clients, performing appropriate activities to protect the interests of investors.

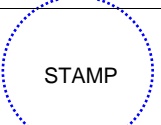
The Bank warns that, having received the status of a professional client, the client may lose some rights for the protection of investors, that is:

1) the Bank will not be obliged to: – analyze and determine whether Bank's provided investment services are applicable to the client or its representative and correspond with Client's interests; – to inform the client about difficulties of order execution; – provide to the client detailed Bank's Order Execution Policy for Financial Instruments; – provide to the client detailed information about reports, characteristic of financial instruments, costs of Banking services, Banking services, protection events performed by the Bank in respect of security client's financial instruments and cash safekeeping;
2) the professional client has no rights to claim compensation of losses as per order stated in Republic of Latvia "Investor Protection Law".

Client's acknowledgement

By signing this application, the client acknowledges, that: – the Bank has warned him about losing rights for the protection of investors, by acquiring the status of a professional client; – he realizes the risks involved and agrees with the consequences of the loss of rights for the protection of investors; – he undertakes to reaffirm his decision on assignment/change of client's status by concluding a written agreement with the Bank; – he undertakes not to lay any claim and to waive a right to claim against the Bank in regard with this application; – he undertakes to provide the Bank immediately with information about the changes in his activities if it could affect his compliance with the criteria required for status of a Professional client.
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Client

Client's (or its representative's) signature		Transcript of the signature
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Bank's notes

Client's and its representative's powers and identity are verified.	
Bank's employee	Date
_____ (name, surname, signature, position)	_____ 20____