

## CLIENT'S FORM

(for legal entities non-residents of the Republic of Latvia)

Client's code
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Dear Client! In accordance with the international standards and the laws and regulations of the European Union (hereinafter referred to as the EU) and the Republic of Latvia, AS "PNB Banka" (hereinafter referred to as the Bank) must obtain from you the information requested in this form. The Bank ensures confidentiality of the received information in accordance with the requirements of the laws and regulations.

We ask you to fill out all the boxes of the form in full and with good faith. The received information will allow the Bank to offer you attractive Banking services. The Bank would like to thank you for understanding and cooperation in filling out the form.

### CLIENT'S INFORMATION

Name

Registration No

Registered office address

Current address (head office address, if differs from the registered office address)

Mailing address (if differs from the current address)

Phone number (with country code)

Mobile phone (with country code)

Web address

E-mail address

Skype

Select the language of communication with the Bank:

Russian

English

Latvian

### INFORMATION ABOUT THE CLIENT'S LEGAL REPRESENTATIVE

Name, surname

Place of birth (specify country)

Residence address (actual)

Phone number (with country code)

Mobile phone (with country code)

E-mail address

Skype

Client's legal representative is acting on the basis of

Statutes

power of attorney

other (specify)

Name, surname

Place of birth (specify country)

Residence address (actual)

Phone number (with country code)

Mobile phone (with country code)

E-mail address:

Skype

Client's legal representative is acting on the basis of

Statutes

power of attorney

other (specify)

Name, surname

Place of birth (specify country)

Residence address (actual)

Phone number (with country code)

Mobile phone (with country code)

E-mail address

Skype

Client's legal representative is acting on the basis of

Statutes

power of attorney

other (specify)

**Bank**

**Client**

(signature)

(signature)

**INFORMATION ABOUT THE CONTACT PERSON OF THE CLIENT** (provided information will be used if the Client could not be reached)

Name, surname

Phone number (with country code)

Mobile phone (with country code)

E-mail address

Skype

**INFORMATION ABOUT BUSINESS ACTIVITY OF THE CLIENT****Business profile of the client's business activity, within which financial transactions will be performed**

- |  |   |
|--|---|
| <input type="checkbox"/> Wholesale trade   | <input type="checkbox"/> Transport services, storage                    |
| <input type="checkbox"/> Retail trade  | <input type="checkbox"/> Information technologies and telecommunication |
| <input type="checkbox"/> Manufacturing, processing industry  | <input type="checkbox"/> Agriculture, forestry and fishing              |
| <input type="checkbox"/> Financial and investment activities(specify):   | <input type="checkbox"/> Real estate operations                         |
| <input type="checkbox"/> Transactions with securities  | <input type="checkbox"/> Construction                                   |
| <input type="checkbox"/> FOREX transactions  | <input type="checkbox"/> Extractive industry                            |
| <input type="checkbox"/> Investments into shares of other companies  | <input type="checkbox"/> Tourism, hotel industry                        |
| <input type="checkbox"/> Organization of gambling  |   |
| <input type="checkbox"/> Non-staff accountant services, where the person opens a Bank account in its name in order to perform financial transactions on behalf of another client   |   |
| <input type="checkbox"/> Lawyer services or services for establishment and maintenance of activity of a legal formation, where the company opens a Bank account in its name in order to perform financial transactions on behalf of another client |   |
| <input type="checkbox"/> Other (specify) _____   |   |

**Regions of the Company's business activity** (countries, where the commercial activity is carried out)

- Latvia
- EU (specify) \_\_\_\_\_
- CIS (Commonwealth of Independent States) (specify) \_\_\_\_\_
- Other countries, regions (specify) \_\_\_\_\_

**Detailed description of the Company's main activity:**


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**Is any license or special permit required for the specified types of activity and operations at the main place of business?**

- NO       YES (please provide to the Bank copies of license / permit)

**Does the Company have an obligation to submit financial statements to the state authorities?**

- NO       YES (please provide to the Bank financial statements for the last reporting period)

**Actual period of the Company's business activity** \_\_\_\_\_ ( years) \_\_\_\_\_ ( months)**Type of the business activity**

- permanent     seasonal (please specify period type )

**Number of employed persons**

- less than 10     10-50     50-250     more than 250

**Annual net turnover of the Company (EUR)**

- 0-2 m     2-10 m     10-50 m     more than 50 m

**Origin of funds for conduct of business**

- income from business activity       borrowed funds
- other (specify) \_\_\_\_\_

**Bank****Client**

(signature)

(signature)

**REASONS FOR OPENING OF ACCOUNT IN LATVIA**

- |   |  |
|---|--|
| <input type="checkbox"/> possibility of providing services to foreign clients | <input type="checkbox"/> accessibility (business hours, online bank, etc.) |
| <input type="checkbox"/> stable financial system                              | <input type="checkbox"/> individual service                                |
| <input type="checkbox"/> stable political environment                         | <input type="checkbox"/> competitive rates                                 |
| <input type="checkbox"/> partners have accounts opened in the banks of Latvia | <input type="checkbox"/> performance of deposits                           |
| <input type="checkbox"/> property in Latvia                                   |  |
| <input type="checkbox"/> other (specify) _____                                |  |

**ACCOUNTS IN OTHER BANKS**

- 
- NO
- 
- YES (please specify)

Other bank	Country
1.	1.
2.	2.
3.	3.

**THE BANK'S SERVICES PLANNED TO BE USED**

- |  |  |
|--|--|
| <input type="checkbox"/> settlement accounts   | <input type="checkbox"/> transactions with financial instruments |
| <input type="checkbox"/> payment cards   | <input type="checkbox"/> trust transactions                      |
| <input type="checkbox"/> remote account management   | <input type="checkbox"/> foreign exchange transactions           |
| <input type="checkbox"/> savings accounts  | <input type="checkbox"/> deposits                                |
| <input type="checkbox"/> loans/lease   |  |
| <input type="checkbox"/> payments: <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/> other currencies (specify) _____ |  |
| <input type="checkbox"/> other (specify) _____   |  |

**INFORMATION ON PLANNED INCOMING PAYMENTS AT THE BANK**

Please specify purpose of payments:

- |   |   |
|---|---|
| <input type="checkbox"/> proceeds from buyers or service recipients | <input type="checkbox"/> proceeds from participation in other societies |
| <input type="checkbox"/> investments of owners of the company       | <input type="checkbox"/> loans (credits)                                |
| <input type="checkbox"/> other (specify) _____                      |   |

**INFORMATION ON PLANNED OUTGOING PAYMENTS AT THE BANK**

Please specify purpose of payments:

- |  |   |
|--|---|
| <input type="checkbox"/> payments for supplies and services            | <input type="checkbox"/> mandatory state payments (taxes, fees) |
| <input type="checkbox"/> repayment of loans                            | <input type="checkbox"/> administrative expenses                |
| <input type="checkbox"/> wages (specify periodicity) _____             |   |
| <input type="checkbox"/> investments (specify investment sphere) _____ |   |

**Bank****Client**

(signature)

(signature)

**PLANNED MONTHLY TRANSACTIONS ON ACCOUNTS (EUR)**

Type of transaction	Number of transactions per month	Maximum turnover per month
Incoming non-cash payments		
Outgoing non-cash payments		
Cash deposit		
Cash withdrawal, including with payment card		

**PLANNED MAXIMUM AMOUNT OF ONE TRANSACTION (EUR)**

Type of transaction	Amount
Non-cash transactions, incl. with payment card	
Cash transactions, incl. with payment card	

If transactions that will not form a regular monthly turnover are planned, specify the purpose and the amount in EUR (e.g. loan, sale of property, deposit, etc.)

**PLANNED AVERAGE BALANCE ON THE ACCOUNTS (EUR)**

\_\_\_\_\_ (specify amount)

By signing it, I hereby confirm that the submitted information is true and accurate and I undertake to notify the Bank immediately in writing about all the changes in the submitted information. I am informed and agree that in accordance with Article 195.1 of the Criminal Code of the Republic of Latvia the provision of false information to the Bank is a criminal infraction and is punishable under the criminal law. I am informed and agree that the Bank is entitled to verify the information and obtain additional information on the Client (as well as on Authorised representative of the Client) and on Client's owner beneficiary in the extent and according to procedures specified in regulations that related to money laundering and terrorist financing prevention area. I undertake to submit the required documents at the first request of the Bank and within the time limit set by the Bank.

**SIGNATURE OF THE CLIENT'S LEGAL REPRESENTATIVE/S**

\_\_\_\_\_  
Position, signature, name, surname of the Client's legal representative

Date: \_\_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Position, signature, name, surname of the Client's legal representative

Date: \_\_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Position, signature, name, surname of the Client's legal representative

Date: \_\_\_\_\_ 20 \_\_\_\_

**L.S.**

**SIGNATURE OF THE BANK EMPLOYEE/INTERMEDIARY**

Identification of the Client/Client's legal representative has been performed. Authorization of the Client's legal representative has been checked. The document has been signed in my presence.

\_\_\_\_\_  
Position, signature, name, surname of the employee/intermediary of the Bank

Date: \_\_\_\_\_ 20 \_\_\_\_

**NOTES OF THE BANK**

\_\_\_\_\_  
Position, signature, name, surname of the representative of the Bank

Date: \_\_\_\_\_ 20 \_\_\_\_

**L.S.**