

BRANCH

Completion

(filled in by authorized SB employee)

Remark:

APPLICATION

Client ID number

for client identification/revision - individual

□ RESIDENT	□ NON-RESIDENT						
PERSONAL DATA	Name and surnam	e		Father's name*			
Date and place of bi	rth Resident addres	s (from the document for personal identif	ication)	Contact adress (if diferent than Resident adre	ess)	Personal Registration Number (PRN)	
Document for personal identification of the client (the data stated are taken from one of the documents listed below – a copy of the document is kept in the client file)							
1. ID card number		Issuing authority	Date	e of expiry Cc	ountry		
2. Passport number		Country		Da	te of expiry		

1. CLIENT CONTACT DA	TA Contact address		Contact telephone
E-mail*	Occupation	Employer Add	dress / Phone number of employer*
ACTIVITY OF EMPLOYER:	 public administration education agricu accounting, information technology and telecommunic notaries public tourism and catering international organizations self-employed p other 	cations 8. traffic 9. sports, arts and cultu 14. financial mediation and banks 15. econom	

2. OTHER CLIENT DATA							Nationality		
1. AMOUNT OF	AVERAGE MON	ITHLY IN	COME: a) up to MKD 2	20,000 b) MKD 20,000 -	50,000 c) abov	e MKD 50,000	2. NO MONTHLY INC	COME	
OTHER ADDITIC	ONAL SOURCES	5 of Mon	ITHLY a) Y	ES 1. up to N	1KD 30,000 (if affirmative,	2. above I the client should	4KD 30,000 circle 1 or 2)	b) NO	
PROPERTY OWNED*	1. apartment	, house	2. real estate	3. owner of a company _			(name of the	company)	
4. holder of stake / shares in a company (more than 25% ownership) 5. other property (name of the company)						property			
MARITAL STATU	JS* 1. marr	ried	2. single	9					
BANK PRODUCTS AND SERVICES USED OR TO BE USED BY THE CLIENT IN FUTURE*:			1. transaction account	2. credit card	3. deposits (Circle the	4. loans e number of the	5. e-banking product/service)	6. safe-deposit box	7. other
OTHER CAUSES FOR THE PURPOSE OF THE BUSINESS RELATIONSHIP:									
ACCOUNTS IN OTHER BANK(S)*:									

CLIENT'S CONSENT

By signing this application I herewith confirm that:

a) The data stated above are correct.

b) in case of change of my personal data (including the address data), I shall notify the Bank thereof within 3 working days from the occurrence of the change. Otherwise, each delivery by the Bank to the Client shall be considered as properly facilitated on the address stated herewith.

c) I agree my personal data stated in this application to be registered, processed and updated for the needs of the Bank and, if needed, the Bank to transfer my personal data to other EU or EEA member-countries or other countries which are not members of EU or EEA, upon prior approval for transfer of personal data by the Office for personal data protection.

d) I am informed that the above stated data are business secret according to the Banking Law and other applicable regulations.

e) The Bank reserves the right to require other client data with reference to the established business relationship.

f) I am informed and agree that the Bank reserves the right to reject the establishing of business relationship.

g) I am informed and agree that Bank reserves the right to terminate the business relationship with the client at any time.

h) I am familiar with the terms and conditions on establishing business relationship with the bank and I accept these in their entirety.

THE BANK RESERVES THE RIGHT TO REJECT THE APPLICATION WITHOUT ADDITIONAL CLARIFICAITON

Important notice: The application is considered as completed if all the required information is included, for which verification is done by an authorized Bank employee who is establishing / revising the business relation with the client.

USE OF CONTACT DATA FOR SENDING PROMOTIONAL OFFERS

By the completion of this application, I herewith confirm that:

□ **I agree** my personal data to be used for promotional activities and improvement of the services of the Bank.

□ I disagree my personal data stated in this Application to be used in future for any kind of promotional activities.

(The client may, by submitting a written request to the Bank, and without any charge, request from the Bank not to use his/her personal data for promotional activities.)

By signing this application I hereby confirm that:

I act solel	y on m	y own behalf	, for m	y account and my	/ interest	, but not for behalf	, for account and for interest of a third	party, i.e. another person.
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I act for behalf, for account and for interest of another person _____

*data that are not mandatory

3. STATEMENT FOR HOLDERS OF PUBLIC FUNCTION

T	with ID card	1/nassnort
*	(name and surname)	
herewith declare, under moral, criminal and material responsibilit	ty that:	
a) I am neither a holder of public function (Politically Exposed F	Person – PEP) and/nor a person related to a holder of public function (PEP)	
b) I am a holder of public function (PEP)	and/or a person related to a holder of public	
(the pos	sition is stated)	(the position is stated)
 "Holders of public function¹/Politically Exposed Persons (PEP) a Republic of Macedonia or abroad, such as: a) Presidents of states and governments, ministers and deputy b) Members of Parliament, c) Elected and appointed public prosecutors and judges in coud d) Members of state audit institution and members of board of e) Ambassadors, f) High-ranking officers in the armed forces (ranks higher thar g) Other elected and appointed persons pursuant to law and n h) Persons with functions in political parties (members of politi i) Persons to whom are or were appointed prominent function other equal functions. The term "holders of public function" (PEP) includes also: a) Members of the family according to Family Law b) persons that are considered close associates: business partners (each individual known to have joint ow function") and persons that incorporated legal entity in favor of the holder 	Irts, f central bank, n colonel), nembers of management bodies of state–owned enterprises ical party bodies) and n in international organization, such as: directors, deputy directors, members of Bo unership over the legal entity, to have signed agreements and established other clo	bards of Directors and Supervisory Boards or Dose business relations with "holder of public
, ,	information is included and the statement for holders of public function, as well, f ion with the client.	for which verification is done by an authorized
Submitted by		
(Name and Last name)	(Signature)	(Place and Date)
TO BE FILLED IN BY THE BANK		
Application is accepted and inspected by:	Signature of the authorized person in the Bank:	Position:

Date:

Branch:

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