

Completion date:	
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	BRANCH Client ID number Remark:
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(filled in by authorized SB employee)

APPLICATION

for client identification/revision - individual

☐ RESIDENT		NON-RESIDEN	Г										
PERSONAL DAT	AL DATA Name and surname Father								Father's name*	ner's name*			
Date and place of	of birth	birth Resident address (from the document for personal identification) Contact adress (if diferent than Resident							Personal Registration Number (PRN)				
Document for pe	ersonal id	dentification of	the client (the data stated ar	re taken from one of the	documents list	ed below – a	a copy of the	e docume	ent is kept in the	e client file)			
1. ID card numb	oer		Issuing authority	Dat	ate of expiry			Cou	Country				
2. Passport num	nber		Country					Date	e of expiry				
1. CLIENT CONT	TACT DA		t address				Telephone /	fax		Mobile tele	phone		
E-mail*			Occupation	Employ	er			Address /	Phone number	of employer*	•		
ACTIVITY OF EMPLOYER:		12. notaries	ng, information technology are public 13. tourism and	nd telecommunications	4. health care 8. traffic cial mediation a 18. non-go	9. sports		ulture Iomic & le	n 6. trade 10. enforcers egal consulting casinos, betting	11. law			
2. OTHER CLIEN	NT DATA	Country of	residence				Natio	onality					
1. AMOUNT OF	AVERAG	E MONTHLY IN	COME: a) up to MKD 20,00	0 b) MKD 20,000 – 50,	,000 c) above	MKD 50,000	2. NO M	ONTHLY	INCOME				
OTHER ADDITION	ONAL SO	URCES OF MO	NTHLY a) YES	1. up to MKD (i	30,000 if affirmative, t		ve MKD 30,0 uld circle 1			b) NO			
PROPERTY OWNED*	1. apai	tment, house	2. real estate 3. ow	ner of a company			,	'nama of	the company)				
OWNLD			·							,			
	4. hold	er of stake / sh	/ shares in a company (more than 25% ownership)										
MARITAL STATU	IS* 1	. married	2. single										
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 number of the		banking service)	6. safe-o	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.

TO BE FILLED IN BY THE BANK

Application is accepted and inspected by: Signature of the authorized person in the Bank: Position: Date: Branch: