

BANK'S ORGANISATION UNIT

TAX ID NO.

COMPANY NAME

CLIENT'S (COMPANY/CRAFT) ID NO. (MBS/MBO)

POSTAL CODE AND PLACE

STREET &amp; NUMBER

PHONE

FAX

E-MAIL

## SIGNATURE CARD

**For the signing of payment transactions documents, general-purpose term deposits\* and orders for the opening and increasing documentary letters of credit amounts, with the use of seal affixed hereon\*\*, or without the use of seal (non-residents only), authorisation is hereby given to:**

|  |  |
|--|--|
| <p>1. _____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |
| <p>2. _____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |
| <p>3. _____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |
| <p>4. _____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |
| <p>5. _____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |
| <p>6. _____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |

**For the signing of other documents used in the payment system and transactions with documentary letters of credit (modifications of orders, excluding order amount increase, and other), the authorisation is hereby given to:**

- ☐ PERSONS INDICATED ABOVE     ☐ BESIDES THE ABOVE LISTED PERSONS, AUTHORISED ARE ALSO THE BELOW INDICATED PERSONS

|   |  |
|---|--|
| <p>_____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |
| <p>_____<br/>(FULL NAME)</p> <div style="border-bottom: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <p style="text-align: center; font-size: small;">TAX ID NO.</p> <p> <input type="radio"/> SINGLE SIGNATORY     <input type="radio"/> JOINT SIGNATORY         </p> | <p>_____<br/>(SIGNATURE)</p> <hr/> <p style="text-align: center; font-size: small;">(IDENTITY CARD NUMBER AND PLACE OF ISSUANCE)</p> <p> <input type="radio"/> HRK     <input type="radio"/> FX         </p> |

\* EXCLUDING THE CASH DEPOSITING TRANSACTIONS MASTER AGREEMENT

\*\* FOR RESIDENTS, THE USE OF SEAL IS MANDATORY

**NOTE:**

By signing this document, we accept the application of the General Operating Terms of PRIVREDNA BANKA ZAGREB d.d. for transaction accounts and performance of payment and other services for non-consumers, as may be amended, which will be applied to all our contractual relations with PBZ in connection with all accounts specified herein. We have received the mentioned Terms, in written form, jointly with this document.  
**Receipt (to be certified by the Bank)**

\_\_\_\_\_  
SIGNATURE AND SEAL OF THE BANK

L.S.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
AUTHORISED REPRESENTATIVE'S SIGNATURE

## STATEMENT

By signing this Statement, I give explicit consent to Privredna banka Zagreb d.d. to undertake any action related to the processing and exchange of all my personal data specified in this Statement, which forms an integral part of the documents related to the opening and managing of transaction account, and the data collected pursuant to regulations, including the data on my PIN, required for processing the application for account opening and managing, as well as for all further processing related thereto, which implies the Bank's right to collect, store, organise, have insight into and transfer all personal data, so as to allow the performance of regular business activities of Privredna banka Zagreb and the groups of which the Bank is a member in the country and abroad (hereinafter: PBZ Group), incident to the present business relation, for the purpose of preventing money laundering and terrorism financing, detecting and investigating frauds and misuses in the payment system, and dealing with objections, as well as to forward the data to a legal entity of adequate organisation form, which may be established by banks in an aim to collect and provide data on total amount, types and timely settlement of individuals' and legal entities' obligations originated under any ground.

By signing his Statement, I confirm to have been informed, prior to the signing hereof, about the identity of the personal data collection manager, about the purpose of intended data processing, about the existing right to data access and the right to correct the data referring to me, about the personal data recipients, and about whether it implies voluntary or mandatory supply of data and possible consequences of denied data supply.

I acknowledge to have been informed, prior to the signing hereof, about the intended use of personal data and about the right to object to such processing. By signing this statement, I give consent to such processing.

I give my consent to Privredna banka Zagreb d.d. to inform me, through all available means of communication, about products and services within its business activity, which are oriented towards promotion of this product, as well as of all the other products and services of the PBZ Group.

|                       |                    |
|-----------------------|--------------------|
| 1. _____<br>FULL NAME | _____<br>SIGNATURE |
| 2. _____<br>FULL NAME | _____<br>SIGNATURE |
| 3. _____<br>FULL NAME | _____<br>SIGNATURE |
| 4. _____<br>FULL NAME | _____<br>SIGNATURE |
| 5. _____<br>FULL NAME | _____<br>SIGNATURE |
| 6. _____<br>FULL NAME | _____<br>SIGNATURE |
| 7. _____<br>FULL NAME | _____<br>SIGNATURE |
| 8. _____<br>FULL NAME | _____<br>SIGNATURE |

This Statement is issued in accordance with the Act on Personal Data Protection. Each authorised signatory to this Signature Card signs the Statement individually, on a copy of the Signature Card kept by the Bank.