

# Customer Questionnaire (for private person)

Basic information				
Client CIF				
Date				
Place				
Name				
Surname				
Middle name				
Date of birth				
Personal identity code				
Country of birth				
City of birth				
Client address/-	es			
Declared address				
Country				
Postal code				
Region/Municipality				
Area/Parish				
City/Village				
Street				
House				
Flat				
Actual address				
The actual addre	ss match the declares address			
Country				
Postal code				
Region/Municipality				
Area/Parish				
City/Village				
Street				
House				
Flat				

## For correspondence address

For correspondence address match declared address

For correspondence address match actual address

Country				
Postal code				
Region/Municipalit	ty			
Area/Parish				
City/Village				
Street				
House				
Flat				
Contact infor	rmation			
Phone				
Phone				
E-mail				
E-mail				
Skype				
www				
Citizonshin a	nd noreonal i	dentificatio	n documents	
Citizenship a	nd personal i	dentificatio	n documents	
Citizenship a  Document type	nd personal id	dentificatio	n documents  Residence permit	
				•
Document type				
Document type Number				
Document type  Number  Date of issue				
Document type  Number  Date of issue  Indefinite				
Document type  Number  Date of issue  Indefinite  Valid until				
Document type  Number  Date of issue  Indefinite  Valid until  Country				
Document type  Number  Date of issue  Indefinite  Valid until  Country				
Document type  Number  Date of issue  Indefinite  Valid until  Country  Issuing authority	Passport	ID card	Residence permit	
Document type  Number  Date of issue  Indefinite  Valid until  Country  Issuing authority  Document type	Passport	ID card	Residence permit	
Document type  Number  Date of issue  Indefinite  Valid until  Country  Issuing authority  Document type  Number	Passport	ID card	Residence permit	
Document type Number Date of issue Indefinite Valid until Country Issuing authority  Document type Number Date of issue	Passport	ID card	Residence permit	
Document type  Number  Date of issue  Indefinite  Valid until  Country  Issuing authority  Document type  Number  Date of issue  Indefinite	Passport	ID card	Residence permit	

# Country of tax residence Please indicate countries of tax residence 1. Country of tax residence In accordance with normative acts of the tax residence country, taxpayes number is granted to the Client Tax payer number (if such is assigned) 2. Country of tax residence In accordance with normative acts of the tax residence country, taxpayes number is granted to the Client Tax payer number (if such is assigned) 3. Country of tax residence In accordance with normative acts of the tax residence country, taxpayes number is granted to the Client Tax payer number (if such is assigned) If you did not indicate any countries of tax residence, please provide justification. Information to determin USA tax payer status Are you person related to a USA? No Yes (explain) Person, who is related with the USA, is a person, who meets one of the specified conditions: 1) Person has USA citizenship or permanent residence status (Green Card): 2) Person is a tax resident of the USA; 3) Person's place of birth is the USA; 4) Person has a phone number with a USA country code; 5) Personal residence address or correspondence address is in the USA (including USA P.O. box); 6) Power of attorney has been issued by a person who is related with the USA. Is your place of birth in the USA? Are you a USA citizen? Are you a USA tax payer? Do you have a USA residence permit (Green Card)? Do you have a phone number with a USA country code? Do you have a USA mailing address (including the USA. P.O. box)? (specify address) Other relationship with the USA (please explain) In case of one or more of the positive response, necessary fill out the form W-8BEN or W-9. True beneficiary I certify that I am the true beneficiary Politically exposed person Are you a Politically exposed person? Yes (explain)

Politically exposed person — a person, who is currently, or has been in the past in the Republic of Latvia or other member state or third country, in a publicly significant position, including the highest official of a state authority, head of state administrative division (local government), head of a government, a minister (deputy of minister or deputy of minister's deputy, if the respective country has such a position), secretary of state or other high level official in a government or state administrative division (local government), member of a parliament or member of a pinilar legislative body, member of an authoritative structure (the board) of a political party, a judge of the constitutional court, supreme court or a different level court (member of a judicial institution), member of the council or member of the board in highest revision (audit) institution, member of the council or member of the board of a central bank, an ambassador, authorized clerk, highest officer of the armed forces, member of the council or member of the board or a person, who has an equivalent position in this organization.

Are you a family member of a	Politically exposed person?
No Yes (explain	n)
politically exposed person, or he/she is a share	ed person – natural person, about who it is known, that the person has business relationship or other close relations with sholder or member in the same capital company with politically exposed persons, as well a natural person, who is the sole is known, that it has been established in the interest of a politically exposed person.
Are you a person closely asso	ciated with a Politically exposed person?
No Yes (explain	1)
politically exposed person, or he/she is a share	ed person – natural person, about who it is known, that the person has business relationship or other close relations with sholder or member in the same capital company with politically exposed persons, as well a natural person, who is the sole is known, that it has been established in the interest of a politically exposed person.
	ration V N-
Salary / honorarium / remuner	ation Yes No
Name of employer	
Position	
Years of experience	Less than a year 1-3 years 4-5 years 6-10 years
	11-15 years 16-20 years more than 20 years
Scholarship / pension / benef	it Yes No
Housekeeper	Yes No
Inheritance	Yes No
Type of inheritance	testamentary legal contractual
Source of borrowed funds	Yes No
Borrowed funds	
Interest / dividends	Yes No
Company name	
Number of capital share:	3
Shares / equity	Yes No
Company name	
Number of capital shar	es
Sale of real estate	Yes No
Specify the subject of the	
Sale of financial instrument	ts Yes No
	he sale of financial instruments
Do you have a status of a pe	rson conducting economic activity? Yes No
Income from economic activi	
Industry	
Other sources of income	No Yes (explain)
Monthly income total (EUR)	up to 1200 1201-3000 3001-5000

If more than 5001 (specify)

#### Planned services and payments

#### Planned Bank services Settlement service Payment cards (planned number of cards) Term deposits\* Lending E-commerce Documentary operations (letters of credit, etc.) Escrow account opening and servicing Individual safes\* Transactions in financial instruments (shares, bonds, etc.) POS terminals Other Bank services (specify) Planned payments to the accounts Salary / scholarship / benefit Income / expenses of economic activity Interest / dividends Loan received / loan repayment Payment for goods and services (incl. utility payments) Purchase / sale of financial instruments Other planned payments (specify) Planned transactions in the Account(s) Are there any transactions planned on the accounts, except Bank's commissions and/or Bank's interests (Individual safes, Term deposits)? Yes (fill in the information about all transactions at once and separately for cash transactions at ATMs if are planned) Incoming transactions, EUR up to 1200 1201-3000 3001-5000 Maximum amount of one incoming transaction more than 5001 (specify) 1201-3000 3001-5000 up to 1200 Maximum incoming turnover on accounts per month more than 5001 (specify) 14401-36000 36001-60000 up to 14400 Maximum incoming turnover on accounts per year more than 60001 (specify) Number of planned incoming transactions per month Outgoing transactions, EUR Maximum amount of one outgoing transaction up to 1200 1201-3000 3001-5000 more than 5001 (specify) up to 1200 1201-3000 3001-5000 Maximum outgoing turnover on accounts per month more than 5001 (specify) Maximum outgoing turnover on accounts per year up to 14400 14401-36000 36001-60000 more than 60001 (specify) Number of planned outgoing transactions per month

#### **Cash transactions** Are there any transactions with cash at ATMs planned? No Yes ("Withdrawing, EUR") Withdrawal, EUR Maximum amount of one withdrawal not planned up to 500 501-1000 1001-5000 more than 5001 (specify) Maximum total amount of money withdrawals per month not planned up to 500 501-1000 1001-5000 more than 5001 (specify) Maximum number of money withdrawals per month Need to use cash (please explain) **One-time transactions** Are one-time transactions planned that will exceed the maximum amount of one transaction specified by you? Maximum amount Currency Planned term 1 month 3 months Within six months In a year From or to which credit institution or financial institution Purpose of the transaction Purpose of use of Bank services The account will be used for personal needs Yes No From which countries incoming payments are planned: Latvia Yes No ES/EEZ countries Yes No Other countries Yes (specify other countries)

To which countries outgoing payments are planned:

No

No

Yes (specify other countries)

Yes

Yes

Latvia

ES/EEZ countries

Other countries

### Other accounts Do you have an account(s) with another credit institution(s) or financial institution(s)? Nο Yes Name Country Name Country Name Country Name Country Name Country **Economic activity** Yes Nο The account will be used for the execution of economic activity If the answer is "yes", please fill in the application "Information about economic activity". **Customer confirmation** I Certify that the information in this document is complete and true. I undertake to immediately inform the Bank in writing on any changes in the above information. I am informed that in accordance with General terms of service, this Application is an integral part of the Agreement and the signing of this Application means the signing of the Agreement, except the Bank Services, which can be received only by signing of Special agreement. - I am informed that in accordance with the normative acts of the Republic of Latvia, the Bank is obligated to acquire information on the Client's tax residence and other related information to it, and that in cases prescribed for in the normative acts of the Republic of Latvia the Bank is obligated to provide information to the State revenue service and that the specified information is intended for the purpose of client research (including in-depth research) specified in the Law on the Prevention of Money Laundering and Terrorism Financing. — I am informed that the Bank processes (collects, stores, records, submits, transfers, transmits, etc.) the Client's data and other persons' data submitted by the Client, as well as in accordance with Applicable legal acts requests and receives the above-mentioned data and other information from the third parties and processes it. Bank has the right to transfer the Client's personal data to the third parties, if the Bank considers it necessary for the provision of services or debt recovery from the Client. The Client confirms that, he / she has right to transfer data of other natural persons to the Bank, for that he / she has received all necessary consents. - I undertake not to use accounts in the Bank and services of the Bank in transactions that may result in the violation of legislative acts of the Republic of Latvia, the European Union or the United Nations or decisions of international organisations, which determine persons or territories subjected to sanctions / limitations or limitations to the movement of certain goods. - I confirm that I have read the Bank's General Terms of Service, the Bank's Tariffs and Personal Data Processing Policy, which are available on the <a href="https://www.magnetiqbank.com">www.magnetiqbank.com</a> website and at the Bank's customer service points, I understand them and am aware that they will apply to the legal relationship between me and the Bank. The Client / Client's representative

(signature)

(date)

(The Bank representative position, name, surname)

To be completed by a representative of the Bank, who identifies the Client.

The document has been signed in my presence. I confirm the identity and signature of the Client / Client's representative.

(signature)