AS **LPB Bank** • Reģ. Nr. 50103189561 • SWIFT: LAPBLV2X
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Questionnaire of the power of attorney

Power of Attorney issued _____ Nr. _____
(date)

Type of Power of Attorney: ☐ Notarial act ☐ Bank's Power of attorney ☐ Other (comment) _____

Date _____ Venue _____

Questionnaire filled in (check)**:**

☐ The Authorising person (Client CIF A _____)

☐ The Authorised person

THE AUTHORISING PERSON (Client) _____
(the person granting the authorisation) (name, surname / company name)

Personal code (date of birth) / Registration number _____

THE AUTHORISED PERSON:
(attorney)

Name, surname _____

Personal code / date of birth _____ Place of birth _____

Passport / ID card No. _____ Date of issue _____

Expiry date _____ Issuing country _____

Issuing authority _____

The Authorised person's legal address: Street, house, apartment _____

City _____ Country _____ Postal code _____ Country code ☐☐

The Authorised person's actual address: Street, house, apartment _____

City _____ Country _____ Postal code _____ Country code ☐☐

Phone + _____ E-mail _____

Attorney's and principal's relationship (comment) _____

Is the Authorised person a Politically exposed person? * ☐ Yes (explain) _____ ☐ No

Is the Authorised person a Family member of a politically exposed person? ** ☐ Yes (explain) _____ ☐ No

Is the Authorised person a Person closely related with a politically exposed person? ***

☐ Yes (explain) _____ ☐ No

Is the Authorised person related with the US? ****

☐ Yes (fill the form "Information for determining US tax payer status" for each Authorised person separately) ☐ No

The reason of undertaken by attorney the scope of authority established in Power of Attorney (comment)

_____

_____

_____
The Authorising person / The Authorising person's representative / -s / The Authorised person's signature

Explanations

* 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 similar 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 of a state capital company, head (director, deputy director) of an international organization and member of the board or a person, who has an equivalent position in this organization.

** Family member of a politically exposed person — a person, who is the politically exposed person's: a) spouse or a person comparable to a spouse. A person can be considered as comparable to a spouse, only if the legislation of the respective country provides for such a status, b) child or child of the politically exposed person's spouse, or child of a person comparable to a spouse, his/her spouse or a person comparable to a spouse, c) parent, grandparent or grandchild, d) brother or sister;

*** Person closely related with a politically exposed person – natural person, about who it is known, that the person has business relationship or other close relations with politically exposedperson, or he/she is a shareholder or member in the same capital company with politically exposed persons, as well a natural person, who is the sole owner of a legal establishment, about which it is known, that it has been established in the interest of a politically exposed person.

**** Person, who is related with the US, is a person, who meets one of the specified conditions: 1) Person has US citizenship or permanent residence status (green card); 2) Person is a tax resident of the US; 3) Person's place of birth is the US; 4) Person has a phone number with a US country code; 5) Personal residence address or correspondence address is in the US (including US P.O. box); 6) Power

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, Bank's Power of attorney 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.

The Authorising person / The Authorising person's representative	(position)	(name, surname)	(signature)	Seal
The Authorising person's representative	(position)	(name, surname)	(signature)	
The Authorised person	(name, surname)	(signature)		

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 / -s of the Client / Client's representative / -s.

(The Bank representative position, name, surname)	(signature)	(date)

Bank notes

Customer service department

(remarks)	(The Bank representative position, name, surname)	(signature)	(date)