



## 2. Information on the Beneficial owner (hereinafter – BO)

- 2.1. Name, surname: 2.1.1. Personal ID No. /Date of Birth:  
2.1.2. Passport/ID number: 2.1.3. Issuing date:  
2.1.4. Valid until:  
2.1.5. Passport/ID issuer, country of issue: 2.1.6. Share in the Company (%)  
2.1.7. Shareholding participation in other business areas (please indicate for > 10% ownership)  
No Yes (please specify the Company name, industry of business, ownership share)  
2.1.8. The BO's legal address (street, house No, apartment):  
City: Country: Postal code:  
2.1.9. The BO's actual address (street, house No, apartment):  
City: Country: Postal code:  
2.1.10. Existence of a criminal record: No Yes (please specify)  
2.1.11. Is the BO a Politically exposed person<sup>1</sup>?  
No Yes (please specify)  
Is the BO a family member of a Politically exposed person<sup>2</sup>?  
No Yes (please specify)  
Is the BO a close associate of a Politically exposed person<sup>3</sup>?  
No Yes (please specify)  
Is the BO related to the US person<sup>4</sup>?  
No Yes (please fill out the "Information for determining US tax payer status" form for each BO separately)  
2.1.12. Sources of the BO's funds:  
Salary/honorarium/reward Sale of property Interest/Dividends; Heritage  
Sale of shares/equities Rent/Credit Other  
2.1.13. 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  
2.1.14. Monthly income total (EUR) up to 1200 1201-3000 3001-5000  
If more than 5001 (specify)  
2.1.15. Financial position together (EUR)

- 2.2. Name, surname: 2.2.1. Personal ID No./Date of Birth:  
2.2.2. Passport/ID number: 2.2.3. Issuing date: 2.2.4. Valid until:  
2.2.5. Passport/ID issuer, country of issue: 2.2.6. Share in the Company (%)  
2.2.7. Shareholder participation in other business areas (please indicate for > 10% ownership) No Yes (please specify  
the company name, industry of business, ownership share)  
2.2.8. The BO's legal address (street, house No, apartment):  
City: Country: Postal code:  
2.2.9. The BO's actual address (street, house No, apartment):  
City: Country: Postal code:  
2.2.10. Existence of a criminal record: No Yes (please specify)  
2.2.11. Is the BO a Politically exposed person<sup>1</sup>?  
No Yes (please specify)  
Is the BO a family member of a Politically exposed person<sup>2</sup>?  
No Yes (please specify)  
Is the BO a close associate of a Politically exposed person<sup>3</sup>?  
No Yes (please specify)  
Is the BO related to the US person<sup>4</sup>?  
No Yes (please fill out the "Information for determining US tax payer status" form for each BO separately)  
2.2.12. Sources of the BO's funds:  
Salary/honorarium/reward Sale of property Interest/Dividends Heritage  
Sale of shares/equities Rent/Credit Other  
2.2.13. Name of employer Position  
Years of experience Less than a year 1-3 years 4-5 years 6-10 years  
11-15 years 16-20years more than 20 years  
2.2.14. Monthly income total (EUR) up to 1200 1201- 3000 3001-5000  
If more than 5001 (specify)  
2.2.15. Financial position together (EUR)

2.3. Name, surname: \_\_\_\_\_ 2.3.1. Personal ID No./Date of Birth: \_\_\_\_\_

2.3.2. Passport/ID number: \_\_\_\_\_ 2.3.3. Issuing date: \_\_\_\_\_ 2.3.4. Valid until: \_\_\_\_\_

2.3.5. Passport/ID issuer, country of issue: \_\_\_\_\_ 2.3.6. Share in the Company (%) \_\_\_\_\_

2.3.7. Shareholder participation in other business areas (please indicate for > 10% ownership) No Yes (please specify the company name, industry of business, ownership share)

2.3.8. The BO's legal address (street, house No, apartment): \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

2.3.9. The BO's actual address (street, house No, apartment): \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

2.3.10. Existence of a criminal record: No Yes (please specify)

2.3.11. Is the BO a Politically exposed person<sup>1</sup>?  
No Yes (please specify)

Is the BO a family member of a Politically exposed person<sup>2</sup>?  
No Yes (please specify)

Is the BO a close associate of a Politically exposed person<sup>3</sup>?  
No Yes (please specify)

Is the BO related to the US person<sup>4</sup>?  
No Yes (please fill out the "Information for determining US tax payer status" form for each BO separately)

2.3.12. Sources of the BO's funds:  
Salary/honorarium/reward                      Sale of property                      Interest/Dividends                      Heritage  
Sale of shares/equities                      Rent/Credit                      Other

2.3.13. 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

2.3.14. Monthly income total (EUR)                      up to 1200                      1201-3000                      3001-5000  
If more than 5001 (specify)

2.3.15. Financial position together (EUR)

2.4. Name, surname: \_\_\_\_\_ 2.4.1. Personal ID No. /Date of Birth: \_\_\_\_\_

2.4.2. Passport/ID number: \_\_\_\_\_ 2.4.3. Issuing date: \_\_\_\_\_

2.4.4. Valid until: \_\_\_\_\_

2.4.5. Passport/ID issuer, country of issue: \_\_\_\_\_ 2.4.6. Share in the Company (%) \_\_\_\_\_

2.4.7. Shareholder participation in other business areas (please indicate for > 10% ownership)  
No Yes (please specify the company name, industry of business, ownership share)

2.4.8. The BO's legal address (street, house No, apartment): \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

2.4.9. The BO's actual address (street, house No, apartment): \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

2.4.10. Existence of a criminal record: No Yes (please specify)

2.4.11. Is the BO a Politically exposed person<sup>1</sup>?  
No Yes (please specify)

Is the BO a family member of a Politically exposed person<sup>2</sup>?  
No Yes (please specify)

Is the BO a close associate of a Politically exposed person<sup>3</sup>?  
No Yes (please specify)

Is the BO related to the US person<sup>4</sup>?  
No Yes (please fill out the "Information for determining US tax payer status" form for each BO separately)

2.4.12. Sources of the BO's funds:  
Salary/honorarium/reward                      Sale of property                      Interest/Dividends                      Heritage  
Sale of shares/equities                      Rent/Credit                      Other

2.4.13. 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

2.4.14. Monthly income total (EUR)                      up to 1200                      1201-3000                      3001-5000  
If more than 5001 (specify)

2.4.15. Financial position together (EUR)

### 3. Company representative (including the person, to sign the agreement with the Bank)

- 3.1. Name, surname: 3.1.1. Position:  
3.1.2. Basis/position of representative  
3.1.3. Term of representation: Until Indefinit  
3.1.4. Personal ID No./Date of Birth: 3.1.5. Passport/ID number:  
3.1.6. Issuing date: 3.1.7. Valid until  
3.1.8. Passport/ID issuer, country of issue:  
3.1.9. Legal address:  
3.1.10. Actual address:  
3.1.11. Contact information: phone + e-mail  
3.1.12. Existence of a criminal record: No Yes (please specify)  
3.2. Name, surname: 3.2.1. Position:  
3.2.2. Basis/position of representative  
3.2.3. Term of representation: Until Indefinit  
3.2.4. Personal ID No./Date of Birth: 3.2.5. Passport/ID number:  
3.2.6. Issuing date: 3.2.7. Valid until  
3.2.8. Passport/ID issuer, country of issue:  
3.2.9. Legal address:  
3.2.10. Actual address:  
3.2.11. Contact information: phone + e-mail  
3.2.12. Existence of a criminal record: No Yes (please specify)

### 4. Contact persons

- 4.1. General contact person  
4.1.1. Name, surname:  
4.1.2. Phone No. + e-mail  
4.2. Contact person responsible for Payment Card transactions (Chargebacks etc.)  
4.2.1. Name, surname:  
4.2.2. Phone No. + e-mail  
4.3. Contact person responsible for financial (accounting) matters  
4.3.1. Name, surname:  
4.3.2. Phone No. + e-mail

### 5. Information about business activity

- 5.1. Please choose the industry of business activity:

Production

Construction

Agriculture, forestry and fisheries

Military goods or services

Public administration and defence

Provision of services, including:

Customs services

Logistics services

Tourism/catering services

Marketing/advertising services

Legal services (provider of legal community's services)

Lawyer

Outsourced accounting services

Consulting services

Gambling organisation

Health or pharmaceutical services

Business and management consultancy activities

Waste management

Real estate brokerage

Parking service providers (except for PI)

Self-service vending machines

Self-service laundries

Trade, including:

Trade in precious metals, precious stones or jewellery

Works of art or antiques

Trade in arms and ammunition

Trade in exclusive goods

Trade services for small and medium-sized enterprises (beverages, tobacco trade)

Mining, including:

Precious metals, precious stones

Mining of gold and other underground resources

Oil or gas

Information technologies, telecommunications, computer services

Online services (e-commerce), including:

Ticket sales on the internet

Internet sales of goods and services

Internet sales of content meant for adults (incl. dating sites)

Organising gambling on the internet

Financial services, including:

Insurance or reinsurance

Insurance or reinsurance brokerage

Payment institution

Electronic money institutions

Credit institution

Cash logistics services

Financial institutions attracting finances and money lenders (pawnshops)

Leasing, factoring unions, consumer creditors

Investment brokerage company (incl. Forex)

Investment management company

State pension funds

Private pension funds

Private and public pension investment plans

Alternative investment funds  
Alternative investment fund managers  
Credit unions  
Crowdfunding service provider  
Credit claims trading on web platforms  
Financial innovation service provider  
Provision of money services  
Currency exchange, currency brokerage services  
Investments and activities in the securities market

Other (specify)

5.1.1. Please specify the specifics of business appropriate:

Clothing/footwear sales  
Automobile/Motorcycle rentals  
Gambling/Bookmaking\*  
Travel services  
Electronic sales  
Eating places and restaurants (incl.cafés)  
Forex/Investments\*  
Dating services  
Educational services  
Cryptocurrency merchant/Cryptocurrency exchange services\*  
Cash exchange/transfer services\*  
Adult content services  
Games  
Social networks  
Sales not elsewhere classified  
Hotel/Accommodation  
Other (please specify below):

Specify the specifics of business if necessary:

5.1.2. Types of business according to NACE2 classification:

**If chosen industry marked with an asterisk (\*), please fill out sections 5.3, 5.4, 5.6, 6.11. below.**

5.2. Does the E-Merchant engage in economic activity in the country of registration? Yes No (please specify the country in which the economic activity takes place)

\*5.3. Is the E-Merchant a member or participant in an organization of merchants in the relevant field?

Yes (please specify name)

Website

No

\*5.4. Main countries where the E-Merchant engages in economic activity:

5.5. Please describe your customers:

Individuals                      % of the total number of customers  
Legal entities                      % of the total number of customers  
LV residents                      % of the total number of customers  
LV non-residents                      % of the total number of customers

\*5.6. Please specify countries of residence of your customers

5.7. Please specify countries of economic/personal activity of your customers

5.8. Duration of business activities (in years)                      5.9. Last year's turnover

**6. Additional questions to the E-Merchant whose business activity requires licensing or registration with a competent authority**

6.1. Please specify legislation applicable to these business activities (in the country of incorporation/country of doing business):

6.2. Is the Company, in its country of incorporation, subject to laws preventing money laundering or terrorist financing?

No                      Yes (please specify the laws, other regulations, internal regulations, the names, surnames, contact information of responsible persons):

6.3. Does the Company maintain a unit or officials tasked with sanctions compliance?                      No                      Yes

If so, please specify the unit, name and surname and contact information of responsible official:

6.4. Does the Company carry out checks of partners/goods/services against sanctions lists/restrictions, before providing goods/services and payments?                      Yes                      No                      Partly

Describe

6.5. Does the Company carry out regular checks of partners/intermediaries/customers against sanctions lists/restrictions?                      Yes                      No                      Partly

Describe

6.6. Compliance with what types of sanctions does the Company maintain?

UN                      EU                      OFAC                      Latvian                      Other (please describe)

6.7. Does the Company carry out customer identification, due diligence, analysis of the origin of funds, and keep documents related to customer due diligence? (please describe)

6.8. Does the Company carry out the identification of its' customers remotely?                      No                      Yes

6.9. Please describe the methods of control and restrictions that the Company uses to comply with the requirements relevant to its line of business (including notices, warnings, etc.)

6.10. Is the Company subject to regular inspections by a supervisory authority?                      No                      Yes (please indicate the supervisory authority and the date of the last inspection)

\*6.11. Is the Company a financial institution in the interpretation of U.S. FATCA\*?                      No                      Yes (please specify)

FATCA conformity status of the financial institution:

FATCA Global Intermediary Identification Number (GIIN):

Reasons for the lack of the financial institution's GIIN:

\* "Financial institution" – a Custodial Institution, a Depository Institution, an Investment Entity, or a Specified Insurance Company.

a) "Custodial Institution" – any entity that holds, as a substantial portion of its business, financial assets for the account of others.

b) "Depository Institution" – any entity that accept deposits in the ordinary course of a banking or similar business.

c) "Investment Entity" – any entity that conducts as a business (or is managed by an entity that conducts as a business) one or more of the following activities or operations for or on behalf of a Merchant (such as an account holder):

i) Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading;

ii) Individual or collective portfolio management; or

iii) otherwise investing, administering, or managing funds or money, on behalf of other persons.

This subparagraph "c" shall be interpreted in a manner consistent with similar language set forth in the definition of "Financial Institution" in the Financial Action Task Force or FATF Recommendations.

d) "Specified Insurance Company" – any entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.

## 7. Documents to be provided to the Bank (upon request)

7.1. Registration documents	Bank (e.g. a resolution, order, regulation, etc, by the founders, members or other authority)
7.2. Articles of Association	
7.3. Excerpt from the Company Register of the Company of incorporation with complete applicable information (no older than 15 days)	7.6. License (if available)
7.4. Identification document (passport) of the Authorized Person	7.7. Financial Statements
7.5. Document certifying the delegate's authority to represent the Merchant in the dealings with AS Magnetiq	7.8. Contracts with partners
	7.9. Recommendations / statements from banks, including the current bank acquirer
	7.10. Documents on the ownership / lease property
	7.11. Other

<sup>1</sup> 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, holding a publicly significant position, including the highest official of a state authority, head of a 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 (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 a supreme inspection (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, member of the board or a person holding an equivalent position in such organization.

<sup>2</sup> 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 to a spouse only if the legislation of the respective country provides for this kind of a status, b) a child or a child of the politically exposed person's spouse, or child of a person comparable to a spouse, the child's spouse or person comparable to a spouse, c) parent, grandparent or grandchild, d) brother or sister.

<sup>3</sup> Close associate a politically exposed person – a person about whom it is known that the person has business relationship or other close relations with the politically exposed person, or that they are a shareholder or member in the same company with the politically exposed persons, as well a person who is the sole owner of a legal establishment about which it is known, that it has been established in the interest of the politically exposed person.

<sup>4</sup> U.S. person – a person who meets any of the following conditions: 1) The person has U.S. citizenship or a legal residence permit (green card); 2) The person is a United States taxpayer; 3) The person's place of birth is the United States; 4) The person has a phone number with a US country code; 5) The person's residence address or correspondence address is in the United States (including a United States P.O. box); 6) A power of attorney was issued to a U.S. person.

## Declarations:

### I Certify that the information in this document is complete and true.

- I am informed that, in accordance with General Terms of Service, the E-Merchant Questionnaire is an integral part of the Agreement, and that the signing of this Application means the signing of the Agreement, unless the relevant service of the Bank requires the signing of a special agreement.
- I am informed that, in accordance with the applicable legislation of the Republic of Latvia, the Bank is obligated to acquire information on the E-Merchant's tax residence and related information, and that in cases prescribed for in the applicable legislation 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 due diligence (including enhanced due diligence) as specified in the Law on the Prevention of Money Laundering and Terrorism and Proliferation Financing.
- The E-Merchant is not involved in providing other goods or services except those stated in the Questionnaire.
- The E-Merchant will immediately notify the Bank if the range of services offered by it changes.
- The E-Merchant's representative is entitled to represent the E-Merchant and to provide on its behalf the information stated in this Questionnaire, which shall be binding upon the E-Merchant and the Bank.
- The E-Merchant's representative is informed about the responsibility, including criminal liability, for providing false or misleading data.
- I represent that the E-Merchant has become acquainted with the Bank's General Terms of Service, the Bank's Pricelist and Personal Data Processing Policy, which is available on the Bank's website and at the client service locations of the Bank, I understand them and I am aware that they will apply to the legal relationship between myself and the Bank.
- I consent to the Bank conducting processing (collection, retention, registration, entry, transfer, transmission etc.) of the personal data of the E-Merchant and other persons as provided by it and, in accordance with the procedure specified in the applicable legislation, request and receive the aforementioned data and other information from third parties and process it. The Bank is entitled to transfer the E-Merchant's personal data to third parties if, in the opinion of the Bank, this is necessary for providing services to or collecting debt from the E-Merchant. The E-Merchant represents that it is entitled to transfer other parties' personal data to the Bank.
- I undertake not to use accounts with the Bank, or the Bank's services, in transactions that would result in the circumvention of international or national sanctions instituted under the applicable legislation or decisions adopted by the Republic of Latvia, the European Union, the U.S. Office of Foreign Assets Control (OFAC) or the U.N. Security Council, and determining the persons/formations subject to sanctions/restrictions, territories subject to sanctions/restrictions, or restrictions on the circulation of certain goods.

## Authorised representative

(name, surname)

(position)

(signature)

(date)