

Please complete in block letters and mark (X) where appropriate

Base number (to be filled in by the Bank) _____

CUSTOMER

Company name _____
 Registration number _____ Date of registration _____
 Legal address _____

CUSTOMER REPRESENTATIVE

Name, surname _____
 Position _____
 Personal ID number¹/date of birth² _____ Country of residence _____
 Identification document: Passport Other (title) _____
 Series, number _____ Date of issuance _____ Expiry date _____
 Issuing authority _____ Country of issuance _____
 Residential address _____
 Phone _____ Fax _____ E-mail _____

¹for residents of Latvia ²for non-residents of Latvia

AUTHORISATION AND REMOTE ACCOUNT MANAGEMENT TOOLS

Common access with the Settlement Account _____
 Provide separate access:
 Privat24 Digipass Code card _____
 Password via SMS to phone No. _____

ADDITIONAL ACCOUNT STATEMENTS

In Privat24 _____
 By other means _____

By signing this Application, I request the Bank to open a Additional Account in the Customer's name, assign a Customer Representative to this Account, provide the Bank services according to this Application and ensure their maintenance in accordance with the AS "PrivatBank" General Regulations for Transactions and the Bank Fees, which together form an Agreement.

By concluding the Agreement, I undertake full responsibility for any actions performed on accounts using the Authorisation and Remote Account Management Tools, and for the consequences of such actions. I undertake full responsibility for unauthorised access by third parties to the Authorisation and Remote Account Management Tools I received. Please consider the documents signed using the aforementioned tools as authentic, binding upon the Customer and Bank, and equivalent to documents executed in written (paper) form and signed as provided by the efficient regulatory enactments of the Republic of Latvia, with full legal effect and any legal consequences it may invoke.

On behalf of the Customer:

On behalf of the Bank:

<p>_____</p> <p>Customer representative (name, surname)</p> <p>_____</p> <p>Signature, seal</p> <p>Date _____ Place of signing (city, country) _____</p>	<p>_____</p> <p>Bank representative (name, surname)</p> <p>_____</p> <p>Signature, seal</p>
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TO BE FILLED IN BY THE BANK:

Reserved Additional Account number _____ **L V P R T T** _____
 Notes: _____

