



BRANCH / SUB-BRANCH	Client ID number	Remark:
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(filled in by authorized SB employee)

APPLICATION

for client identification/revision - individual

RESIDENT NON-RESIDENT

PERSONAL DATA		Name and surname	Father's name*
Date and place of birth	Address and place (from the document for personal identification)		Personal Registration Number (PRN)
Document for personal identification of the client (the data stated are taken from one of the documents listed below – a copy of the document is kept in the client file)			
1. ID card number	Issuing authority	Date of expiry	Country
2. Passport number	Country	Date of expiry	

1. CLIENT CONTACT DATA			
Contact address		Telephone / fax	Mobile telephone
E-mail*	Occupation	Employer	Address / Phone number of employer*
ACTIVITY OF EMPLOYER:	1. public administration 2. education 3. agriculture 4. health care 5. industry and construction 6. trade 7. accounting, information technology and telecommunications 8. traffic 9. sports, arts and culture 10. enforcers 11. lawyers 12. notaries public 13. tourism and catering 14. financial mediation and banks 15. economic & legal consulting 16. international organizations 17. self-employed person 18. non-government organizations 19. casinos, betting offices, games of chance 20. other _____		

2. OTHER CLIENT DATA		Country of residence	Nationality
1. AMOUNT OF AVERAGE MONTHLY INCOME: a) up to MKD 20,000 b) MKD 20,000 – 50,000 c) above MKD 50,000 2. NO MONTHLY INCOME			
OTHER ADDITIONAL SOURCES OF MONTHLY INCOME:		a) YES	b) NO
		1. up to MKD 30,000	2. above MKD 30,000
		(if affirmative, the client should circle 1 or 2)	
PROPERTY OWNED*	1. apartment, house 2. real estate 3. owner of a company _____ (name of the company) 4. holder of stake / shares in a company (more than 25% ownership) _____ (name of the company) 5. other property _____		
MARITAL STATUS*	1. married 2. single		
BANK PRODUCTS AND SERVICES USED OR TO BE USED BY THE CLIENT IN FUTURE*:	1. transaction account 2. credit card 3. deposits 4. loans 5. e-banking 6. safe-deposit box 7. other (Circle the number of the product/service)		
ACCOUNTS IN OTHER BANK(S)*:			

CLIENT'S CONSENT

By signing this application I herewith confirm that:

- a) The data stated above are correct.
- b) **in case of change** of my personal data (including the address data), **I shall notify the Bank** thereof within 3 working days from the occurrence of the change. Otherwise, each delivery by the Bank to the Client shall be considered as properly facilitated on the address stated herewith.
- c) I agree my personal data stated in this application to be registered, processed and updated for the needs of the Bank and, if needed, the Bank to transfer my personal data to other EU or EEA member-countries or other countries which are not members of EU or EEA, upon prior approval for transfer of personal data by the Office for personal data protection.
- d) I am informed that the above stated data are business secret according to the Banking Law and other applicable regulations.
- e) The Bank reserves the right to require other client data with reference to the established business relationship.
- f) I am informed and agree that the Bank reserves the right to reject the establishing of business relationship.
- g) I am informed and agree that Bank reserves the right to terminate the business relationship with the client at any time.
- h) I am familiar with the terms and conditions on establishing business relationship with the bank and I accept these in their entirety.

USE OF CONTACT DATA FOR SENDING PROMOTIONAL OFFERS

By the completion of this application, I herewith confirm that:

- I agree** my personal data to be used for promotional activities and improvement of the services of the Bank.
- I disagree** my personal data stated in this Application to be used in future for any kind of promotional activities.

(The client may, by submitting a written request to the Bank, and without any charge, request from the Bank not to use his/her personal data for promotional activities.)

*data that are not mandatory

THE BANK RESERVES THE RIGHT TO REJECT THE APPLICATION WITHOUT ADDITIONAL CLARIFICATION

Important notice: The application is considered as completed if all the required information is included, for which verification is done by an authorized Bank employee who is establishing / revising the business relation with the client.

3. STATEMENT FOR HOLDERS OF PUBLIC FUNCTION

I _____ with PRN _____
(name and surname) Personal Registration Number

herewith declare, under moral, criminal and material responsibility that:

a) I am neither a holder of public function and/nor a person related to a holder of public function

b) I am a holder of public function _____ and/or a person related to a holder of public function _____
(the position is stated) (the position is stated)

**Definition on holders of public function and/or persons related to them according to the applicable legal regulations in RM
„Holders of public function“ are individuals **who are not residents of the Republic of Macedonia** who are or have been entrusted with a public function in the Republic of Macedonia or abroad, such as:

- a) Presidents of states and governments, ministers and deputy or assistant ministers,
- b) Members of Parliament,
- c) Elected and appointed public prosecutors and judges in courts,
- d) Members of state audit institution and members of board of central bank,
- e) Ambassadors,
- f) High-ranking officers in the armed forces (ranks higher than colonel),
- g) Other elected and appointed persons pursuant to law and members of management bodies of state-owned enterprises, and
- h) Persons with functions in political parties (members of political party bodies).

The term "holders of public function" includes also:

- a) close members of the family with whom the holder of the public function lives in communion at the same address, and
- b) persons that are considered close associates:
 - business partners (each individual known to have joint ownership over the legal entity, to have signed agreements and established other close business relations with "holder of public function") and
 - persons that incorporated legal entity in favor of the holders of public function.

The persons referred to in items a) through h) are considered holders of public function at least a year after the termination of the political function, on the basis of the previously implemented risk assessment by the entities;

Note: The application is considered as completed if all required information is included and the statement for holders of public function, as well, for which verification is done by an authorized Bank employee who is establishing / revising the business relation with the client.

Submitted by

(Name and Last name)

(Signature)

(Place and Date)

TO BE FILLED IN BY THE BANK

Application is accepted and inspected by:	Signature of the authorized person in the Bank:	Position:
Date:	Branch/Sub-branch:	

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