



Branch

APPLICATION / REQUEST
for client identification/for up to date (Individual)

Date of filling in/completion

Client ID No.

☐ Resident ☐ Non-resident

1. Main client data

Name and surname		Father's name*
Date and place of birth	State of birth	Personal identification number
Address and place (as stated in the personal identification document)		

Personal identification document 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 number:	Issuing authority:	Date of expiry:	State:
2. Passport number:	State:	Date of expiry:	

2. Client contact data

Contact address	e-mail:																									
Telephone/cell/fax:																										
Status/professional occupancy	<table><tr><td>1. Child</td><td>5. Employed</td><td></td><td></td></tr><tr><td>2. Student</td><td>☐ employee,</td><td>☐ judge,</td><td>☐ officer</td></tr><tr><td>3. Pensioner</td><td>☐ doctor,</td><td>☐ manager,</td><td>☐ advocate,</td></tr><tr><td>4. Unemployed</td><td>☐ professor,</td><td>☐ notary,</td><td>☐ enforcement agent</td></tr><tr><td></td><td>☐ other</td><td></td><td></td></tr></table>			1. Child	5. Employed			2. Student	☐ employee,	☐ judge,	☐ officer	3. Pensioner	☐ doctor,	☐ manager,	☐ advocate,	4. Unemployed	☐ professor,	☐ notary,	☐ enforcement agent		☐ other					
1. Child	5. Employed																									
2. Student	☐ employee,	☐ judge,	☐ officer																							
3. Pensioner	☐ doctor,	☐ manager,	☐ advocate,																							
4. Unemployed	☐ professor,	☐ notary,	☐ enforcement agent																							
	☐ other																									
Employer	Address of employer*																									
Activity of employer	<table><tr><td>1. Industry and Construction</td><td>7. Health care</td><td>15. Economic & legal consulting</td></tr><tr><td>2. Trade</td><td>8. Traffic</td><td>16. Non-governmental organizations</td></tr><tr><td>3. Financial Mediation & Banks</td><td>9. Public administration</td><td>17. International organizations</td></tr><tr><td>4. Accounting, Information Technologies and Telecommunication</td><td>10. Sport, art and culture</td><td>18. Casinos, sport betting shops, games of chance</td></tr><tr><td>5. Tourism and Catering</td><td>11. Agriculture</td><td>19. Activity performing individual</td></tr><tr><td>6. Education</td><td>12. Lawyer</td><td>20. Other</td></tr><tr><td></td><td>13. Notary,</td><td></td></tr><tr><td></td><td>14. Enforcement agents</td><td></td></tr></table>	1. Industry and Construction	7. Health care	15. Economic & legal consulting	2. Trade	8. Traffic	16. Non-governmental organizations	3. Financial Mediation & Banks	9. Public administration	17. International organizations	4. Accounting, Information Technologies and Telecommunication	10. Sport, art and culture	18. Casinos, sport betting shops, games of chance	5. Tourism and Catering	11. Agriculture	19. Activity performing individual	6. Education	12. Lawyer	20. Other		13. Notary,			14. Enforcement agents		
1. Industry and Construction	7. Health care	15. Economic & legal consulting																								
2. Trade	8. Traffic	16. Non-governmental organizations																								
3. Financial Mediation & Banks	9. Public administration	17. International organizations																								
4. Accounting, Information Technologies and Telecommunication	10. Sport, art and culture	18. Casinos, sport betting shops, games of chance																								
5. Tourism and Catering	11. Agriculture	19. Activity performing individual																								
6. Education	12. Lawyer	20. Other																								
	13. Notary,																									
	14. Enforcement agents																									

3. Other client data

Country of residence:	Nationality:
-----------------------	--------------

Amount of regular monthly income

1. Amount of regular monthly income: **a)** from 0.01 to MKD 30.000 **b)** from MKD 30.001 to MKD 60.000 **c)** from 60.001 MKD to 9.999.999.999 MKD
2. No regular monthly income

Other additional sources of monthly income

1. YES **a)** up MKD 30.000 **b)** above MKD 30.000 (if positive answer, the client should mark a or b)
2. NO

Property owned

1. Apartment, house 2. Real estate 3. Owner of a company _____ (title of the company)
4. Owner of part / shares in a company (more than 25% of ownership) _____ (title of the company)
5. Other property _____ 6. Has no other property

Marital status*

1. Married 2. Single

Bank products and services used or to be used by client in future

1. Payment account 2. FX account 3. Payment card 4. Loan(s) 5. Deposit(s) 6. E-banking 7. Letter of Guarantee
8. Letter of Credit 9. Safe-deposit box 10. Other reasons for the purpose and intention for the business relation

Accounts in other bank(s)*:

Client's concurrence:**By signing this application/ request I hereby confirm that:**

- a. The data stated above are correct;
- b. **In case of change** of my personal data (including the address) I shall notify the Bank thereof within 3 working days from the occurrence of the change. Otherwise, each delivery by the Bank on the address stated hereby shall be considered as properly performed;
- c. I agree my personal data stated in this application to be registered, processed and updated for the of the Bank's needs and, if needed, the Bank to transfer my personal data to other countries members of EU or EEA or other countries which are not members of EU or EEA, upon prior approval for transfer of personal data by the Directorate for Personal Data Protection
- d. I am informed that the above stated data are trade secret according to the Banking Law and other current regulations;
- e. The Bank retains the right to ask other client data with reference to the established business relation;
- f. The Bank retains the right to terminate the business relation with the client at any time;
- g. I am informed with the provisions on establishing business relation with the bank and I accept these in their entirety.

Usage of personal data for direct marketing purposes**By completion of this application I hereby confirm the following:**

- ☐ **I allow**, the Bank to contact me for promotional offers concerning the services of the Bank through the contact info stated in the application.
- ☐ **I do not allow**, the Bank to contact me for promotional offers concerning the services of the Bank and/ Services of third parties through the contact information stated in the application.

By completion of this application I hereby confirm the following:

- ☐ **I allow**, the Bank to contact me for promotional offers concerning the services of third parties through the contact information stated in the application.
- ☐ **I do not allow**, the Bank to contact me for promotional offers concerning the services of the Bank and/ Services of third parties through the contact information stated in the application.

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

By signing of this application I hereby confirm that the above stated banking products and products and services I will use:

- ☐ **in my own name and for my own account**
- ☐ **in my own name and on behalf of a third person in whose name and account are used the above stated banking products and services**

Name and surname of the third person	Personal Identification Number	Note

*data which are not mandatory

Remark: The application is considered completed if it comprises all mandatory data, which will be checked by a bank official, who establishes/updates the business relationship with the client.

Applicant (Name and surname)_____ (place and date) _____

(signature) _____

I _____ (name and surname), with ID number _____, hereby declare under moral, criminal and material responsibility that:

a) I am not a holder of public function

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

****Definition on holders of public function (PEP) and/or persons related to them according to the applicable legal regulations in RM**

"Holders of public functions" are natural persons who are, or have been, entrusted with public function in Republic of Macedonia or in another country, such as:

a) Heads of State and Government, Ministers and Deputies or Assistant Ministers;

b) elected representatives in the legislative authority,

c) judges of supreme or constitutional courts or other holders of high judicial functions whose decision, except in exceptional cases, is not subject to legal remedies,

d) members of the management bodies of supervisory and regulatory bodies and agencies, state audit institution and members of the board of a central bank,

e) ambassadors,

f) high ranking military officers (ranks higher than colonel),

g) elected and appointed persons in accordance with the law and the members of the management and supervisory bodies of legal entities established by the state,

h) persons with functions in political parties (members of the executive bodies of political parties),

i) persons who are or have been entrusted with a prominent function in an international organization such as: directors, deputy directors, members of management and supervisory boards or other equivalent functions and

j) mayors and presidents of municipality councils.

The persons defined in paragraphs a) to j) are considered as holders of public functions at least two years after the end of the execution of the public function and based on previously conducted risk assessment by the entities.

The term "holders of public functions" also includes:

1) Members of the family of the holder of public function, specifically:

-spouse or person with whom the holder of public function is in extramarital community,

-children and their spouses or persons with whom the children of the holder of public function are in extramarital community or

-parents of the holder of public function.

2) A person who is considered a close associate of the holder of public function is a natural person:

-which is known to have a common legal or beneficial ownership of a legal entity, has concluded contracts or established other close business relationships with the holder of public function or

-is the only beneficial owner of a legal entity or legal arrangement known to have been established in order to provide benefit for the holder of public function.

Place and date: _____

Declared by:

Name and surname _____

Signed by: _____

Filled out by the Bank

Received and checked the completeness of the application:

(place/branch & date)

(stamp & signature from authorized Bank officer)

(job position)

Name of the client	
Address and place (as stated in the personal identification document)	

For each question, please select one of the offered answers:

1/Does the client have U.S. indicia?	YES	NO
--------------------------------------	-----	----

U.S. indicia: (mark the indicia that the individual has)

- ☐ US citizenship
- ☐ Dual citizenship , of which, one is US citizenship
- ☐ Permission to stay in the USA - (green card)
- ☐ Place of birth in the USA ,Puerto Rico, Guam and Virgin Islands
- ☐ Residential address in USA
- ☐ Contact address in USA
- ☐ Phone number of the USA

2/ Does anyone from the authorized persons/legal representatives/proxies on the clients account, have at least one of the U.S. indicia?	YES	NO
---	-----	----

U.S. indicia: (mark the indicia that the individual has)

- ☐ US citizenship
- ☐ Dual citizenship , of which, one is US citizenship
- ☐ Permission to stay in the USA - (green card)
- ☐ Place of birth in the USA ,Puerto Rico, Guam and Virgin Islands
- ☐ Residential address in USA
- ☐ Contact address in USA
- ☐ Phone number of the USA

Filled out by the Bank

An acceptance note:		
_____	_____	_____
(place and date)	(organizational unit)	(stamp and signature from authorized Bank officer)

STATEMENT FOR THE COLLECTION AND STORAGE OF PERSONAL DATA
Maintained in the Central Cooperative Bank AD Skopje

Consent to the collection and storage of personal data

By signing this statement, I _____ of _____, and in accordance with applicable regulations for the protection of personal data and bank secrecy, I authorize the Central Cooperative Bank AD Skopje (hereinafter: the Bank), as Controller of collections of personal data may for reporting purposes in accordance with the Tax Act released by the United States - Foreign Account Tax Compliance Act (hereinafter: FATCA regulations) **to collect and store** personal data and information constituting bank secrecy, which are provided in process identification, and includes the following data:

1. Information collected and stored
Name and surname / title
Identification number of US taxpayer (TIN);
Date and place of birth (for individuals)
Address of permanent residence (street, number, postcode, city, country) / Seat
Citizenship / Green card (for individuals)
Tax residence country code
Name, address of permanent residence (street, number, postcode, city, country) and TIN of real (substantial) owns the company (for legal entities).

In the case of amendments to the FATCA regulation, I am informed and familiar with the fact that the volume of personal information / data for the legal entity that gather and hear (above) can be increased. To change the FATCA regulations, the Bank will inform the way that you would choose, including:

- Contact address
- Contact phone
- Contact e-mail address (e-mail).

Required highlight one of these ways through which the bank will inform you of changes in FATCA regulations. The Bank may further announcements published on its website and the information boards in branches / subsidiaries of the bank.

THIS STATEMENT IS USED SOLELY FOR HANDLING MATCH FATCA REGULATIONS AND IS VALID DURING MY BUSINESS RELATIONSHIP WITH THE BANK / BUSINESS RELATIONSHIP WITH THE BANK OF LEGAL PERSON WHOSE LEGAL REPRESENTATIVE AM. I AM INFORMED AND FAMILIAR WITH THE POSSIBILITY TO THIS STATEMENT OF WITHDRAW AT ANY TIME BY SUBMITTING A WRITTEN REQUEST, DURING THE BUSINESS RELATIONSHIP AND ACCORDINGLY I AGREE THE BANK TO TERMINATE THE BUSINESS RELATIONSHIP DUE TO WITHDRAWAL OF THE SAME,

Stated by:

.....
(Name and Surname)

.....
(Place, date)

.....
(Signature) / (personal or authorized person of the client)