

A. COMPANY DETAILS			
Company Name:			
Registration No:	Country of Registration:	Date of Registration:	
Name of Approved Professional Intermediary/ Representative (if applicable):			
B. ADDRESSES: B1. REGISTERED ADDRESS			
No & Street:	Bldg. & Apt. / Office no:		
City:	Area:		
Postal Code:	Country:		
B2. COMPANY MANAGEMENT AND HEAD OFFICE ADDRESS			
No & Street:	Bldg. & Apt. / Office no:		
City:	Area:		
Postal Code:	Country:		
Telephone:	Fax:		
Email:			
B3. PHYSICAL ADDRESS (address of the principal established business, such as the main factory or production, not P.O.BOX)			
B4. CORRESPONDENCE DETAILS			
No & Street:	Bldg. & Apt. / Office no:		
City:	Area:		
P.O. BOX:	Postal Code:	Country:	
Telephone:	Fax:		
Email 1:	Email 2:		
Contact Person:	Telephone:	Email:	
C. DIRECTORS & SECRETARY (written exactly as on passport/incorporation document)			
C1. Director Name:			PEP* (Y/N):
C2. Director Name:			PEP* (Y/N):
C3. Director Name:			PEP* (Y/N):
<b>Secretary Name:</b>			PEP* (Y/N):
D. SHARE CAPITAL AND REGISTERED SHAREHOLDERS			
Authorized share Capital:	Issued share Capital:	Issue Date:	
D1. Registered Shareholder Name:			PEP* (Y/N):
D2. Registered Shareholder Name:			PEP* (Y/N):
D3. Registered Shareholder Name:			PEP* (Y/N):
D4. Registered Shareholder Name:			PEP* (Y/N):
E. BENEFICIAL OWNERS (written exactly as on passport/incorporation document)			
E1. Beneficial Owner 1:	Full Name:		PEP* (Y/N):
	Full Residential Address:		
E1. Beneficial Owner 2:	Full Name:		PEP* (Y/N):
	Full Residential Address:		
E1. Beneficial Owner 3:	Full Name:		PEP* (Y/N):
	Full Residential Address:		

F. SIGNATORIES										
F1: Signatory Name:							PEP* (Y/N):			
F2: Signatory Name:							PEP* (Y/N):			
<b>Signatures Combination:</b>		Anyone:		Jointly :		Other, specify :				
G. ECONOMIC PROFILE										
<b>Main Business Activity</b> (Please provide specific descriptions. General descriptions such as "Trading", "Investments", "Consulting" are not acceptable. For Holding companies, the names and business activities of the controlled companies are required )										
Website (mandatory if Internet-related)										
Type of Goods Traded:										
Type of Services Provided:										
Expected Annual Credit Turnover (€):										
Origin (Country/ies) of funds to be credited in own account(s):										
Destination (Country/ies) of own funds to customers or associates:										
Source of the funds to be credited in the account										
H. ACCOUNT OPENING										
<b>Purpose for opening the account(s)</b> (e.g. sustaining main business activities or specific purposes, i.e. fixed deposits/savings, transfers, credit facilities, etc.)										
Number of incoming payments per year:			Upto €200k :		Upto €750k		€750k +			
Number of outgoing payments per year:			Upto €200k :		Upto €750k		€750k +			
Kinds of transactions:			Transfers:		Cheques:		Cash:		Other(Specify):	
<b>Currencies:</b>										
Frequency Of Account Statement: M-Monthly; Q-Quarterly; S/A-Semi-Annually			1		2		3		4	
I. OTHER FACILITIES										
I1. IWe will need Internet Banking Facilities (Y / N):										
If Yes, list details of ibank users:										
<b>ibank user 1:</b>	Name:					Surname:				
	Email (mandatory):					Access level (Full/View):			Digipass (Yes/No):	
<b>ibank user 2:</b>	Name:					Surname:				
	Email (mandatory):					Access level (Full/View):			Digipass (Yes/No):	
<b>ibank user 3:</b>	Name:					Surname:				
	Email (mandatory):					Access level (Full/View):			Digipass (Yes/No):	
I2. IWe will need Credit Card Facilities (Y / N):										
If Yes, list details of cardholders and cards required:										
<b>Cardholder 1:</b>	Name:					Surname:				
	Card category:		<b>Electron</b>	<b>Cards with a Limit</b> (If a Limit will be applied, specific documents will be prepared and a security deposit will be required for the amount of up to 2 times the limit): Classic with insurance <input type="checkbox"/> Classic without insurance <input type="checkbox"/> Gold <input type="checkbox"/> Platinum <input type="checkbox"/> <b>Limit, euro:</b>						
<b>Cardholder 2:</b>	Name:					Surname:				
	Card category:		<b>Electron</b>	<b>Cards with a Limit</b> (If a Limit will be applied, specific documents will be prepared and a security deposit will be required for the amount of up to 2 times the limit): Classic with insurance <input type="checkbox"/> Classic without insurance <input type="checkbox"/> Gold <input type="checkbox"/> Platinum <input type="checkbox"/> <b>Limit, euro:</b>						
I3. IWe will need Fax Codes (Y / N):										