

POWER OF ATTORNEY

LEGAL ENTITY

NOTE: THIS POWER OF ATTORNEY WILL NOT BE RETURNED TO THE APPLICANT AFTER THE REQUIRED ACT HAS BEEN TAKEN.

PRINCIPAL

Name of legal entity:	ID No.:	VAT No.:
.....
Business address		
Street, Building No./Orientation No., City:		Country:
.....	
A. AUTHORISED PERSON ACCORDING TO APPROPRIATE RECORDS (BUSINESS REGISTER, ETC.)		
Degree, name, surname:		Surname at birth:
.....	
Date of birth:	Personal ID number:	
.....	
Type of document: <input type="checkbox"/> identity card <input type="checkbox"/> passport	Document number:	
.....	
Residential address		
Street:	Building No./ Orientation No.:	Postal Code:
.....
City:	Country:	
.....	
B. AUTHORISED PERSON ACCORDING TO APPROPRIATE RECORDS (BUSINESS REGISTER, ETC.)		
Degree, name, surname:		Surname at birth:
.....	
Date of birth:	Personal ID number:	
.....	
Type of document: <input type="checkbox"/> identity card <input type="checkbox"/> passport	Document number:	
.....	
Residential address		
Street:	Building No./ Orientation No.:	Postal Code:
.....
City:	Country:	
.....	
C. AUTHORISED PERSON ACCORDING TO APPROPRIATE RECORDS (BUSINESS REGISTER, ETC.)		
Degree, name, surname:		Surname at birth:
.....	
Date of birth:	Personal ID number:	
.....	
Type of document: <input type="checkbox"/> identity card <input type="checkbox"/> passport	Document number:	
.....	
Residential address		
Street:	Building No./ Orientation No.:	Postal Code:
.....
City:	Country:	
.....	

ATTORNEY

Degree, name, surname:	Date of birth:	
.....	
Type of document: <input type="checkbox"/> identity card <input type="checkbox"/> passport	Document number:	
.....	
Residential address		
Street:	Building No./ Orientation No.:	Postal Code:
.....
City:	Country:	
.....	
The Principal hereby authorises the Attorney to (fill in by hand what is required):		The Principal hereby authorises the Attorney to take the above-specified acts using the information systems specified below:
A) Submit a onetime request for an extract of inform. of the Principal's personal data		A) Non-banking Client Information Register (NBCIR)
B) Receive a onetime extract of information of the Principal's personal data		B) Register of Payment Information (REPI)
C) Submit a onetime request for correction of Principal's personal data		
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.....	
.....	

Please fill in the required act and cross through any empty space.

In Date
.....
Officially verified signature of the Principal