

A - Legal entities (simple LLC., Ltd., Plc., general partnership, limited partnership, economic interest grouping, holding)

MBK

B – Craftsmen, freelance professionals (lawyers, family farmers) and the like

C - Association, trustee business, foundation, endowment, institution, art organisation, chamber/council, union, employers' association, political party, cooperative, credit union, church organisation

D - Embassy, consulate, international missions

E - State, public sector entity, local and regional self-government unit, public agency, public fund, public institution or chamber/council

F -Trust

CUSTOMER INFORMATION SHEET - LEGAL ENTITY

IDENTIFICATION DATA

The Bank is required to have updated personal data that are collected by this questionnaire pursuant to Anti-Money Laundering and Terrorist Financing Law and the related implemented regulations, EU regulations, regulations of the international community and international standards. The collected data will be used by the Bank for carrying out due diligence of the client, its transactions and fulfilment of obligations in accordance with these regulations.

If the Bank cannot fulfil the requirements regarding due diligence, it may not establish this business relationship, and may be obliged to terminate any existing business relationship.

Please answer only those questions below that are marked with the letter from the header to which a business entity belongs and for which you need to complete the questionnaire.

A B C D E F

Name of the business entity _____

OIB/Registration number _____ / _____

Unique ID in the country of residence¹ _____

Address of registered office _____
(Street and house number, place and postal code, country)

Correspondence address _____

Place and country of registration _____ Date of establishment _____

Contacts: email _____ Phone _____

web _____

ISIC/ NACE code² (_____) Description _____

ISIC code-primary activity (_____) Description _____

Number of employees _____

A

Listed legal entity Yes³ No

Name of the stock exchange _____ Country _____

Ticker ISIN _____

Business entity is a group member YES NO

If the answer is YES, enter group name _____

¹ Must be entered only if the legal entity has no OIB assigned, fill in the LEI code for Banks.

² Please enter the code assigned as per the Decision of the Croatian Bureau of Statistics or (ISIC/NACE code); if the activity code and the primary activity code differ, please enter the primary activity code.

³ Enclose the list of major shareholders from the stock exchange page.

A B C D E F

Customer who works in sectors / branches of activity benefiting from public funds, including UE funds (e.g. public contracts, healthcare, collection and disposal of waste, renewable energy production)

Yes No

Non-Profit Organization

Type of beneficiaries of the activities:

- | | |
|---|---|
| <input type="checkbox"/> Social assistance | <input type="checkbox"/> Conservation, promotion and valorisation of artistic, historic and cultural heritage |
| <input type="checkbox"/> Healthcare assistance | <input type="checkbox"/> Conservation and valorisation of nature, environment and territory |
| <input type="checkbox"/> Education and training | <input type="checkbox"/> Amateur sport |
| <input type="checkbox"/> Scientific research of social interest | <input type="checkbox"/> General charities |
| <input type="checkbox"/> Safeguard of civil rights | <input type="checkbox"/> Other activity / other beneficiaries |

A B C D E F

INFORMATION ABOUT NATURAL PERSONS

Please flag the appropriate box:

- A DIRECTOR MEMBER OF MANAGEMENT BOARD OR OTHER GOVERNING BODY BANKRUPTCY ESTATE MANAGER
- B OWNER OF (CRAFTS, FAMILY FARM, SELF-EMPLOYED)
- C MEMBER REPRESENTATIVE OF RELIGIOUS CONGREGATION
- D AMBASSADOR CONSUL
- E PREFECT MAYOR COUNTY PREFECT MINISTER DIRECTOR/PRINCIPAL
- F FOUNDER MANAGER TRUST PROTECTOR (if any) TRUST BENEFICIARY (if assigned or assignable)

1.

First and last name _____

Domicile address _____
(Street and house number, place and postal code, country)

Residence address (if different from the domicile) _____
(Street and house number, place and postal code, country)

Date of birth _____ Country of birth _____

Citizenship _____

OIB⁴ | | | | | | | | | | | | | | | | Unique ID _____

Type and number of identification document _____

Issuer of the identification document _____

Date of expiration of the identification document _____

Politically Exposed Persons (PEP)⁵ Yes No

Legal representative Yes No

⁴ If you do not have OIB, enter the unique identification code of your country

⁵ You can see who the PEP persons are in the Appendix PEP, and if you are a PEP person, you are obliged to fill in the mentioned form. The Bank may request additional personal data for the purpose of conducting a more detailed customer due diligence

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D AMBASSADOR CONSUL

E PREFECT MAYOR COUNTY PREFECT MINISTER DIRECTOR/PRINCIPAL

F FOUNDER MANAGER TRUST PROTECTOR (if any) TRUST BENEFICIARY (if assigned or assignable)

2.

First and last name _____

Domicile address _____

(Street and house number, place and postal code, country)

Residence address (if different from the domicile)

(Street and house number, place and postal code, country)

Date of birth _____ Country of birth _____

Citizenship _____

OIB⁶ Unique ID _____

Type and number of identification document _____

Issuer of the identification document _____

Date of expiration of the identification document _____

Politically Exposed Persons (PEP)⁷ Yes No

Legal representative Yes No

⁶ If you do not have OIB, enter the unique identification code of your country

⁷ You can see who the PEP persons are in the Appendix PEP, and if you are a PEP person, you are obliged to fill in the mentioned form. The Bank may request additional personal data for the purpose of conducting a more detailed customer due diligence

A B C D E F
Data about authorised person establishing a business relation with the Bank, if other than the person indicated above

 Procurator

 Proxy
3.

First and last name _____

 Domicile address _____
(Street and house number, place and postal code, country)

 Residence address (if different from the domicile) _____
(Street and house number, place and postal code, country)

Date of birth _____ Country of birth _____

Citizenship _____

 OIB⁸ | | | | | | | | | | | | | | | | Unique ID _____

Type and number of identification document _____

Issuer of the identification document _____

Date of expiration of the identification document _____

 Politically Exposed Persons (PEP)⁹ Yes No
A B C D E F
Please specify the purpose of your establishing a business relationship with the Bank
Transaction account:

 for national payments for cross-border and international payments mostly for cash transactions
Financing:

 Loan Domestic commercial credit disinvesting Foreign commercial credit disinvesting

 Guarantees, letters of credit, trade finance Factoring
Other:

 Investment product and services Treasury business Term deposits

 Employee's salaries management (disbursement) Other services
A B C D E F
How much is the expected average annual turnover?

 Up to EUR 700,000.00 Up to EUR 3,500,000.00 Up to EUR 5,500,000.00 Up to EUR 7,000,000.00 Over EUR 7,000,000.00
Origin of money:

- Self-financing (funds from regular business)
- Grants from business partners, sponsors, etc. (borrowing etc.)
- Project financing and/or from EU funds
- Other _____

⁸ If you do not have OIB, enter the unique identification code of your country

⁹ You can see who the PEP persons are in the Appendix PEP, and if you are a PEP person, you are obliged to fill in the mentioned form. The Bank may request additional personal data for the purpose of conducting a more detailed customer due diligence

Country where the economic activity is carried out?

Country with which the Customer mostly does its business, if you operate outside your country, please state one to three countries, whereas you should not enter "EU"

1. _____

2. _____

3. _____

Who are the business partners of the company? Where are they located?

A.1) Supplier

Name	Country	Economic sector ⁹
_____	_____	_____
_____	_____	_____
_____	_____	_____

A.2) A business entity has no business partners-suppliers

- Newly founded business entity
- Business entity has no suppliers
- Others _____

B.1) Clients – Customers

Name	Country	Economic sector ⁹
_____	_____	_____
_____	_____	_____
_____	_____	_____

B.2) A business entity has no business partners -- suppliers / customers /buyers

- Newly founded business entity
- Business entity has no customers/buyers
- Other _____

⁹ See Appendix 2

PERSONAL DATA PROTECTION

Personal data protection: Privredna banka Zagreb d.d., Radnička cesta 50, Zagreb, TIN (OIB) 02535697732, entered in the register of the Commercial Court in Zagreb under the company registration number (MBS) 080002817 (hereinafter: the Bank), as a data controller, operates in accordance with the principles of the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation). Contact details of the data protection officer: sluzbenik.za.zastitu.osobnih.podataka@pbz.hr When clients' personal data are collected, whether from the client at the time of collection or from another source the Bank shall provide information in accordance with Articles 13 and 14 of the General Data Protection Regulation, such as, for instance, information about the Bank as the controller, the purposes and the legal basis of personal data processing, the categories of personal data which are collected, the storage period, the recipients of data, the source of data, as well as the rights related to personal data protection (for instance, the right of access to personal data, the right to erasure, the right to object, etc.). We shall process and use your personal data as well as personal data of other natural persons (e.g. authorised representatives, authorised signatories, contact persons, etc.) provided for the purpose of execution and performance in a lawful, fair and transparent manner, while protecting personal data from unauthorised or unlawful processing and implementing the highest-level technical, security and organisational protection measures. Detailed information on the protection of your privacy is available in the document "Information on the processing of personal data of natural persons in transactions with legal entities" at www.pbz.hr and at the premises of the Bank. By signing this Document, I confirm to have been informed/advised that the data provided in this document are necessary for the Bank, acting as the data controller, in order to honour its legal obligations, pursuant to Article 6, paragraph 1, item c) of the General Data Protection Regulation.

Hereby I confirm that all data given in this document are true and the Bank has the right to check them. I will personally inform the Bank about any changes regarding data given above.

First and last name of authorised representative <small>(identification against presentation of identity card/passport)</small>	Signature of business entity's authorised person	Place, Date / L.P.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Bank employee's _____ Signature: _____
(first and last name)

Place, date, time _____