



Citadele

APPLICATION FOR PAYMENT CARD AND ACCOUNT OPENING

Fn

Application Number

Customer ID

Date (DD, MM, YYYY)

Please complete using BLOCK letters and place a cross X in the appropriate box

1. INFORMATION ON THE CUSTOMER

Language of communication / account statement: English Russian

Name, surname

Address of actual residence
(street, house, flat, town, country, postal code)

Contact address for correspondence if different from the address of actual residence
(street, house, flat, town, country, postal code)

Telephone (home) Mobile phone E-mail address

Date of birth (DD/MM/YY) Passport No.

Passport's issuing authority Country

Please open a current account in the Bank or attach the Card to the existing account (monocurrency account)

Account No*

Please send the Customer's Account Statement: To Citadele online banking By mail to the address of actual residence By mail to the contact address for correspondence

2. INFORMATION ON THE ACCOUNT

3. INFORMATION ON THE CARD

Card	Type of Card			Currency	Collateral
Debit Card	<input type="checkbox"/> Maestro	<input type="checkbox"/> Visa Electron		<input type="checkbox"/> LVL	<input type="checkbox"/> Term deposit
Credit Card	<input type="checkbox"/> MasterCard Standard	<input type="checkbox"/> Visa Classic	<input type="checkbox"/> Visa Platinum	<input type="checkbox"/> USD	<input type="checkbox"/> Safety deposit
	<input type="checkbox"/> MasterCard Gold	<input type="checkbox"/> Visa Gold			
Virtual Card	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa Classic		<input type="checkbox"/> EUR	<input type="checkbox"/> Other
Cash card	<input type="checkbox"/> Cirrus				

Deposit
(amount, currency)

Customer's name and surname on the card (only Latin alphabet to be used) **
..... Password

4. INFORMATION ON THE SUPPLEMENTARY CARDHOLDER

Please issue a supplementary card

Name, surname Cardholder's relationship to the Customer

Address of actual residence
(street, house, flat, town, country, postal code)

Telephone (home) Mobile phone E-mail address

Date of birth (DD/MM/YY) Passport No.

Passport's issuing authority Country

Supplementary cardholder's name and surname on the card (only Latin alphabet to be used) **
..... Password

5. SIGNATURES

I hereby confirm that I have examined the Terms of Use and Servicing of the Card, the Terms of Opening and Maintenance of a Current Account the General Terms of Business and the Pricelist of services of the Bank, and undertake to comply therewith. I am informed that the said Regulations approved by the Executive Board of the Bank are available on the Bank's website and at the structural units of client services.

Special terms and condition

Customer's signature Supplementary cardholder's signature

6. BANK

TO BE FILLED IN BY THE BANK

Special terms and condition
.....
Card number (for Cirrus only)
Deposit
(amount, currency)
Deposit Account No
Card to be sent to

Received:

Place of acceptance
Bank employee
Employee's ID
Signature, stamp

Accepted:

Credit Limit
(amount)
Signature, stamp

* To be filled in by the Bank employee (for the new account only)

** Except Cirrus