SILK ROAD BANK

VISA Business

FRAMEWORK AGREEMENT

VISA PREPAID BUSINESS CARD

PLEASE FILL IN BLOCK CAPITAL

GENERAL CLIENT DATA

Company name:_____

Type of company: ☐ Private Limited ☐ Partnership ☐ Stock Exch. listed ☐ Other form

Registered address:_____

Principle place of business & address_____

Type of Business: _____

Company ID number:_____ Tax Number:_____ Company Founding date:_____

Main Telephone No:_____ Fax:_____ E-mail: _____

Fully paid up Share Capital of the company: USD/EUR_____

Optional:

Name of legal entity printed on the card Yes ☐ No ☐ (written in Latin, no more than 30 characters including spaces):

CARD OPTIONS

Limit per card (min. USD 100 or USD 10,000 - in EUR counter value) _____ EUR

Note: Daily limit in trading and withdrawing cash (max. US$10.000 in EUR counter value) _____ EUR

CARD USER 1 Information

Surname:_____First Name:_____

Passport/ID Number:_____ Sex M ☐ F ☐

Issued by:_____ Expiry date:_____

Date of birth:_____Place of birth: _____Country of birth:_____

Nationality:_____

Permanent resident address: Street_____ Town_____Country_____P.O no_____

Residence phone No:_____Mobile No._____e-mail: _____

Position in the company:_____ Employed since:_____

Cardholder name (if you want to be printed on the card - written in Latin, no more than 23 characters with spaces)

Daily limit in trading (max. US$10.000 in EUR counter value) _____ EUR

Daily withdrawing cash (max. US$10.000 in EUR counter value) _____ EUR

*Copy of passport attached

CARD USER 2 Information

Surname:_____First Name:_____

Passport/ID Number:_____ Sex M ☐ F ☐

Issued by:_____Expiry date:_____

Date of birth:_____Place of birth: _____Country of birth:_____

Nationality:_____

Permanent resident address: Street_____ Town_____Country_____P.O no_____

Residence phone No:_____Mobile No._____e-mail: _____

Cardholder name (if you want to be printed on the card - written in Latin, no more than 23 characters with spaces)

Daily limit in trading (max. US$10.000 in EUR counter value) _____ EUR

Daily withdrawing cash (max. US$10.000 in EUR counter value) _____ EUR

*Copy of passport attached

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CARD USER 3 Information

Surname:_____First Name:_____

Passport/ID Number:_____ Sex M ☐ ☐

Issued by:_____Expiry date:_____

Date of birth:_____Place of birth: _____Country of birth:_____

Nationality:_____

Permanent resident address: Street_____ Town_____Country_____P.O no_____

Residence phone No:_____Mobile No._____e-mail: _____

Cardholder name (if you want to be printed on the card - written in Latin, no more than 23characters with spaces)

Daily limit in trading (max. US$10.000 in EUR counter value) _____ EUR

Daily withdrawing cash (max. US$10.000 in EUR counter value) _____ EUR

*Copy of passport attached

RESPONSIBLE PERSON FOR RECEIPT OF STATEMENTS AND CORRESPONDENCE

Individual statements.

With individual statements the card holder receives statements for the usage of that card only with each usage of the card. On the wishes of the company all card statements can be bundled and sent to the company address. Please cross the following:

☐ Company address of card holder

☐ Private address of the card holder

☐ Each individual statement to be sent consolidated to the company

Consolidated statements:

With a consolidated statement the company receives each month a consolidated statement of all cards in one statement. You can choose

Name and Surname:_____ Tel./Mobile:_____

E-mail: _____

Address(if its different from legal entity address): _____

TO BE FILLED BY THE BANK

RECEIPT OF APPLICATION ____ ____ _____ (day) (month) (year) NAME OF BANK OFFICER _____ SIGNATURE _____

BRANCH OFFICE _____ DATE APPROVED_____

CONTROLLED BY (Full Name) _____ BRANCH MANAGER SIGNATURE _____

Transactional account in Silk Road Bank linked with the card/cards

MKD																

EUR																		

I THE UNDERSIGNED, UNDER FULL MORAL, MATERIAL, AND CRIMINAL LIABILITY, HEREBY DECLARE THAT I HAVE BEEN INFORMED OF THE FOLLOWING:
- THE ABOVE MENTIONED DATA PERTAIN TO ME PERSONALLY, INCLUDING THE DATA POSSESSED BY THE BANK AS PER THE LEGISLATION, WILL BE SUBJECT TO PROCESSING BY THE BANK, AND BY THE LEGAL ENTITY IN CHARGE OF PROCESSING FOR THE CARD OPERATIONS.
-PERSONAL DATA ON THE USER SHALL BE PROTECTED IN ACCORDANCE WITH THE LAW ON PERSONAL DATA PROTECTION.
-THE APPLICATION SHALL BE DEEMED COMPLETE IF IT CONTAINS ALL MANDATORY DATA. THE BANK SHALL RETAIN THE RIGHT NOT TO ESTABLISH OR TERMINATE THE BUSINESS CLIENT WITH A CLIENT, WHO HAS NOT PROVIDED COMPLETE OR HAS PROVIDED INACCURATE DATA IN THE APPLICATION. THE BANK HAS A RIGHT TO INITIATE PROCEEDINGS BEFORE THE COMPETENT INSTITUTIONS DUE TO CLIENT ISSUING INACCURATE DATA.
THE CLIENTS HAVE A RIGHT TO ACCESS AND CORRECTION OF THEIR PERSONAL DATA IN A PROCEEDINGS PRESCRIBED BY THE LAW ON PERSONAL DATA PROTECTION. AS PER THE ABOVE MENTIONED, THE USER HEREBY DECLARES:
1. I HEREBY AGREE TO FORWARD FOR PROCESSING THE DATA COVERED BY THE APPLICATION IN ACCORDANCE WITH THE LAW ON PERSONAL DATA PROTECTION, AS WELL AS THE DATA ARISING FROM THE ACTIVITY OF THE ACCOUNT RELATED TO THE CARD. THE COLLECTED DATA WILL BE STORED IN THE SYSTEM, IN A MANNER, FOLLOWING THE CONDITIONS, AND THE DEADLINES PRESCRIBED BY LAW. SAID CONSENT MAY BE REVOKED AT ANY TIME BY SUBMITTING A WRITTEN STATEMENT TO THE BANK.
2. IRREVOCABLY AND WITHOUT PRIOR NOTICE, I HEREBY INFORM SILK ROAD BANK AD SKOPJE TO CHARGE MY TRANSACTION ACCOUNT FOR ANY TRANSACTION COSTS INCURRED BY USING THE CARD.
3. I HEREBY AGREE TO TRANSFER THE PERSONAL DATA COVERED BY THE APPLICATION ABROAD FOR THE PURPOSE OF CARD PROCESSING.
4. THE ABOVE MENTIONED DATA PERTAINING TO ME PERSONALLY ARE COMPLETE AND ACCURATE AND I AM MORALLY, MATERIALLY AND CRIMINALLY LIABLE.
5. I HAVE BEEN INFORMED THAT THE BANK HAS THE RIGHT TO REJECT THE APPLICATION.

Signature of the authorized person :_____ Place/Date

_____

Stamp from legal entity:_____

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