

KYC QUESTIONNAIRE FOR NATURAL PERSONS

PBZ Card is required to obtain and keep updated personal data that are collected by this Questionnaire pursuant to Law on Prevention of Money Laundering and Terrorism Financing and the related implementing regulations, EU regulations, regulations of the international community and international standards. The collected data will be used by PBZ Card for carrying out due diligence of the Natural person and fulfillment of obligations in accordance with these regulations. If PBZ Card cannot fulfill the requirements regarding due diligence, it cannot establish this business relationship, and may be obliged to terminate any existing business relationship.

DATA ON A NATURAL PERSON FOR WHOM THIS STATEMENT IS ISSUED

Name and surname: _____

Citizenship: _____ OIB/PIN: _____ Date, month and year of birth: _____

Place and country of birth: _____

Address: (street and house number, place, postal code, country): _____

Type of identification document * Personal ID Passport ID number: _____

Date of expiration of the ID: _____ Country of issuer of the identification document: _____

If the natural person has residence in Croatia, please indicate the address of the residence (street and house number, place, postal code, country). Please provide a copy of the valid permit of residence*.

POLITICALLY EXPOSED PERSON'S STATEMENT Are you a Politically Exposed Person (PEP): YES NO

If you are a PEP, please fill the PEP Questionnaire (page 2).

Please indicate the amount of your net income (salary, pension): _____

PURPOSE OF USING THE CREDIT CARD

Payment of goods and services withdraw cash other (please indicate): _____

EXPECTED MONTH TURNOVER

to 5.000 kn from 5.001 kn to 10.000 kn from 10.001 kn to 30.000 kn over 30.001 kn

SOURCE OF ASSETS THAT ARE OR WILL BE THE SUBJECT OF A BUSINESS RELATIONSHIP

salary, pension* (please provide evidence)

other* (please provide evidence):

*Please provide documentation marked with *

By signing this Questionnaire, I certify that the information provided is true and I hereby authorize PBZ Card to verify all the information provided herein. I will personally inform PBZ Card of any changes to the information provided. In case of any change to the data above, I shall inform PBZ Card on any change within 30 days from the day of any such change. I hereby declare, under full material and criminal responsibility, that I'm not engaged in any activity that may conflict with the Constitution, laws and other regulations of the Republic of Croatia and those of the European Union, and that the Contract on Card Issuing is concluded solely for the purpose of performing activities indicated therein. By signing this Questionnaire I agree that PBZ Card may perform any activity regarding processing and exchange of personal data provided herein, including my PIN (OIB) number, which means that PBZ Card has the right to collect, archive, record, organize, make available and transfer my personal data for the purpose of performing any regular activity of PBZ Card (and any regular activity of a Group whose member is PBZ Card) on national or international level, regarding this business relationship with PBZ Card.

Notice on Processing of Personal Data

PBZ Card, as personal data controller in accordance with the provisions of the General Data Protection Regulation (EU) 2016/679, collects and processes personal data that are necessary for the execution of a contract and fulfilling legal obligations or pursuant to its legitimate interest. The signatory of this form hereby certifies that he/she is aware that all the information on purpose and legal basis of processing of personal data, categories of data processed, rights of data subjects in accordance with General Data Protection Regulation are available in the Information on Personal Data Processing published on www.pbzcard.hr or by sending inquiry to the address of data controller or by e-mail: zop@pbzcard.hr. In accordance with the applicable regulations, the data subject has the right to request access to, transfer, rectification, erasure and restriction of processing of its personal data at any time and to file a complaint with PBZ Card and Personal Data Protection Agency. In case the signatory provides data on third parties in this form, the signatory is held responsible for making these data available and the signatory is obliged to inform these third parties in timely manner on the content of the above given data.

Name and surname: _____

Signature _____

Place and date: _____

¹ PEP – Politically Exposed Person is any natural person who is or was in the last 12 months (or longer) carrying out an eminent public duty in an EU member state or third country, including members of his/her immediate family or close associates.

Natural persons carrying out an eminent public duty are: 1. heads of State, prime ministers, ministers and their deputies, state secretaries and assistant ministers; 2. elected members of legislative bodies; 3. members of the governing bodies of political parties; 4. judges of the supreme, constitutional or other high courts whose decisions are not subject to further appeal, except in special cases; 5. judges of courts of auditors; 6. members of the central bank councils; 7. ambassadors, chargés d'affaires and high ranking military officials; 8. members of the management or supervisory boards of legal entities that are owned or predominantly owned by the State; 9. directors, deputy directors, board members and persons carrying out equal functions in international organizations, municipal mayors, city mayors, county prefects and their respective deputies elected in accordance with the law regulating local elections in the Republic of Croatia.

Family members of a Politically Exposed Person are: 1. spouse or extramarital partner of a Politically Exposed Person, 2. children of a Politically Exposed Person and their spouses or extramarital partners or 3. parents of a Politically Exposed Person.

Close associate of a Politically Exposed Person referred to in paragraph 3 of this Article is any natural person: 1. who has a joint beneficial ownership of a legal entity or a legal arrangement, or has any other close business relation with a Politically Exposed Person or 2. who has sole beneficial ownership of a legal entity or a legal arrangement which has been set up for the benefit of a Politically Exposed Person.

POLITICALLY EXPOSED PERSONS (PEP) QUESTIONNAIRE

Do you act (or have acted in the previous 12 months) in your country of permanent residence / usual residence at a prominent public function, or have a close family member or are you a close associate of a person acting at a prominent public function?

Please indicate one of the possible answers:

- I ACT AT A PROMINENT PUBLIC FUNCTION
- I AM A FAMILY MEMBER OF A PERSON WHO ACTS AT A PROMINENT PUBLIC FUNCTION
- I AM AN ASSOCIATE OF A PERSON WHO ACTS AT A PROMINENT PUBLIC FUNCTION

If you act at a prominent public function (1) please select which public function is in question:

- heads of State
- prime ministers
- ministers and their deputies and state secretaries and assistant ministers
- elected members of legislative bodies
- members of the governing bodies of political parties
- judges of supreme or constitutional courts or other high-ranking judicial officials against whose decisions, save for exceptional cases, legal remedies may not be applied
- judges of courts of auditors
- members of central bank councils
- ambassadors, chargés d'affaires and high-ranking military officials
- members of management and supervisory boards in state-owned or majority state-owned legal entities
- directors, deputy directors and members of the board, as well as persons carrying out equivalent function in international organizations
- municipality prefects, mayors, county prefects and their deputies elected on the basis of the law regulating local elections in the Republic of Croatia.

If you have selected any of the above answers, please specify the source of property and assets that are or will be the subject of a business relationship or transaction:

- salary and earnings
- sales of real estate
- inheritance / donation
- return from capital from abroad
- savings
- reimbursements
- sales of financial assets
- other (please indicate): _____

Name and surname: _____

Signature _____

Date: _____