FORM 🗖 DATA/ 🗖 UPDATE PERSONAL DATA FOR INDIVIDUALS / AUTHORIZED PERSON

*

Customer Authorized

Name and surname:

CNP/TIN:

The undersigned, as a Customer, hereby requests the updating of my personal data, according to the following:

🗆 CI 🛛 Pas	sport	Series:	Number:	Issued by:		On the date of:			
🗖 BI									
Residence I	Permit								
Citizenship (al	ll citizens	hips held w	ill be indicated):	Currency 1	residence in Rom	ania: 🗖 Resident;	□ Nonre	esident	
Romanian; Other:				Fiscal resident in Romania: 🔲 YES 🗆 NOT					
Marital status:	□ single	married	divorced 🗆 w	vidow(er)					
Password (eg.	mother's	maiden nan	ne, favorite color	; pet's name	e):				
Home address	Street:			No.:	Block:	Scale:	Floor:	App.:	
	City:			County/Sector:		Country:	Country:		
Residence address	□ The same with the home address; □ Other address (please specify):								
	Street:			No.:	Block:	Scale:	Floor:	App.:	
	City:			County/Se	ector:	Country:			
Mailing address	\Box The same with the home address; \Box The same with the residence address; \Box Other address (please specify):								
	Street:			No.:	Block:	Scale:	Floor:	App.:	
	City:			County/Sector: Country:					
Phone	Mobile:		Home phone	e:	Personal emai	il:			
Studies/last sc	hool grad	uated:							
D primary sc	hool; 🗖 g	ymnasium;	professional s	school; 🗖 h	nigh school; 🗖 hig	gher education; \Box	postgrad	luate studies	
Employer:				Profession:					
Field of activity:				Function:					
I get income a	as a indivi	iduals:		-1					
\Box salaries and	l other sal	ary rights, e	etc.; salary incom	e from serv	vice contracts;				
🗆 income from	n donatio	ns, inherita	nce;						
🗆 income from	n authoriz	zed activitie	es carried out on i	its own;					
🗆 income from	n dividen	ds, interest,	, sales of share, re	ent, usufruc	et, lease;				
□ income from	n social p	protection so	ources (pensions,	allowances	s, scholarships, ai	ds, allowances, lit	fe annuiti	.es);	
☐ income from	n the sale	of movable	e and/or immoval	ble property	у.				
The level of m	y average	e, monthly, o	cumulative incon	ne, obtained	d in lei or equival	ent, is: 🗖 below 5	00 lei ; 🗆	between 501	
	EI; 🗖 bet	ween 1,751	LEI – 4,500 LEI	i; 🗖 betwee	en 4,501 LEI – 6,0)00 LEI; 🗖 over 6	,000 LEI	; 🗆 I don't get	
income.									

Beneficiary :	
	ction of the law, that I am the real beneficiary of the funds/assets held
in my name: 🗖 YES 🗖 NO .	
Important public office held / publicly exposed	
I declare on my own responsibility, under the sand	
□ I do NOT hold / I have NOT held an important	
□ I hold/have held an important public position in	n the last 12 months (to be detailed):
□ I do NOT have a close relationship with a perso	on who holds / has held an important public position in the last 12
months;	
	olds / has held an important public position in the last 12 months:
- I have a business relationship/I am a close assoc	iate, namely
I declare that I am a person in a special relationsh staff:	ip with GARANTI BANK SA ("the Bank") or I am part of the Bank's
□ NOT; □ YES (please provide details)	
I declare that I am part of a group of clients of t category	the Bank or that I have connections that place me in the "single deb
with other clients of the Bank: 🗖 NO 🗖 YES, I be	elong to the following Group:
I currently have open current accounts at other fin	ancial institutions in Romania: 🗖 YES; 🗖 NO
Estimated duration of the business relationship wi	th the Bank: 🗖 under 1 year; 🗖 over 1 year.
I use the current account for:	
□ revenue collection; □ saving up; ; □ carrying types of income and expenses)	out cash operations ; \Box contracting credit; \Box special destination (other
Expected volume or turnover: up to 45,000 LE	I /month 🗖 over 45,000 LEI /month.
STATEMENTS REGARDING TAX INFORM	IATION
	ations (citizenship of the United States of America or tax residence dence in Romania) - all countries in which you have tax residence in will be declared.
Country:	No. tax identification number or equivalent (TIN/NIF):
Country, if there are more than one	No. tax identification number or equivalent (TIN/NIF):
Country, if there are more than two	No. tax identification number or equivalent (TIN/NIF):
	United States of America (only if you were born in the USA and did Jumber – tax identification number granted by the country of fiscal
If you were born in the United States of America, complete the following:	but do not have tax obligations in the United States of America, please

□ I am filing I-407, Certificate of Loss of Citizenship issued by the competent authority of the United States of America. □ I confirm that I was born in the United States of America, but I am not a tax resident of the United States of America,

because.....

* Reasonable explanation for not providing TIN/NIF (only if you are a tax resident in a partner jurisdiction and you have not provided a TIN (Tax Identification Number – tax identification number granted by the country of tax residence)):

If you are tax resident in a partner jurisdiction (under the OECD Common Reporting Standard and FATCA/CRS) and do not provide a TIN/NIF, please complete below:

The country/jurisdiction I am resident in does not issue TIN/NIF to its residents.

□ I am also unable to obtain a TIN/NIF or an equivalent number.

(Please explain why you are unable to obtain a TIN/NIF if you have selected this reason)

• I certify that **I am not a tax resident in other countries** not mentioned in this form.

- Knowing that false statements are punishable according to the criminal law, by submitting the signature I certify and assume responsibility for the reality, completeness and correctness of the data and information mentioned in this form. I oblige myself to notify the bank of any changes regarding those declared, otherwise, the bank is not responsible.
- The processing of my personal data will be done by GARANTI BANK SA, in compliance with the provisions of Regulation (EU) 2016/679 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data.
- My prior information regarding the processing of data as well as the expression of my options regarding the processing based on consent were carried out through the document " *Information Note regarding the processing of personal data* ", attached hereto.

Date							
The bank,	Client,						
Name and surname :	Name and surname :						
Function:	Signature (specimen):						
Signature:							