

(Name, last name)	_	
(Address)	_	
(City, Country)	_	
REQUESTS FOR INFORMATION		
Dear Customer,		
	(OECD) require Danske Bank A/S Lithual More details are available on the website se complete a separate form for each acc orm below and return it within 30 days t	ount holder. o the Danske Bank A/S Lithuania Branch
	II countries of residence for tax purposes change/crs-implementation-and-assista	. For more information about TIN is available nce/tax-residency. If you have any questions ser or local tax authority.
The account holder is only a resident in Lit	thuania for tax purposes*: 🔲 Yes	☐ No (please specify)
Jurisdiction of Residence for Tax Purposes	Taxpayer Identification Number (TIN)	Country does not issue TIN
·		☐ Country does not issue TIN☐ Country does not issue TIN
		☐ Country does not issue TIN
		☐ Country does not issue TIN
* With this information you have confirmed that other than the countries provided.	the account holder, for the purpose of taxation	n, does not have any additional tax residences
FATCA RELATED		
Please state information with respect to ci Service (IRS) regulations.	itizenship and/or tax liability in the United	l States and the U.S. Internal Revenue
Place a check mark in one applicable box b	elow:	
☐ I am a U.S. citizen and/or I am a tax res the section above, including my U.S. TIN	ident of the U.S., and I have indicated the I (Taxpayer Identification Number).	U.S. as one of the jurisdictions of taxation in
☐ I am not a US citizen, and I enclose a co	ppy of the relevant documentation (renun	ciation of US citizenship).
Customer (customer's representative) her 1) all of the data submitted in this applicati request of Danske Bank A/S Lithuania Bra 2) customer will inform Danske Bank A/S	ion is complete and correct and can be conch;	
Date:	Customer's (representative's) name, last name, signature	
DD-MM-YYYY	<del></del>	