

Date _____

BUSINESS CARD APPLICATION FORM

Client's name	Client's code																						
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Client's name on the card (up to 22 characters)																							
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Please

open a new business card account and issue card (-s)

issue business card (-s) to the card account No _____

DATA ON THE CLIENT'S EMPLOYEES TO WHOM THE CARDS ARE ISSUED ON BEHALF OF THE CLIENT

MC Corporate Gold MC Corporate Classic with travel insurance without travel insurance

CARD HOLDER

Name, Surname	Personal ID	Phone number for receiving security code																							
_____	_____	_____																							
Full name on the card (up to 22 characters)		<i>E.g. +370 5 222 33 44</i>																							
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Notice about an individual's personal data processing in the Bank

The Bank registers and uses data about the individual to offer the Customer the best advice and solutions, and to comply with the legal requirements that apply to the Bank as a financial institution. The Customer and individual can read more about what data the Bank registers, how the Bank uses it and an individual's rights in the Privacy notice, which is an integral part of the General Conditions. The Privacy notice is accessible at the Bank's place of Service and on the Bank's website; upon request, a hard-copy of the Privacy notice will be provided to the Customer. The Privacy notice also provides contact information if an individual have questions.

- By signing this document the Cardholder confirms:**
- data submitted in this application is complete and correct and can be certified using documentary evidence at the request of the Bank;
 - he/she will inform the Bank immediately of any changes to the data submitted to the Bank;
 - he/she must familiarize and agree to comply with payment card agreement including the standard terms and conditions of the payment card agreement, standard terms and conditions for provision of payment services, the applicable General Conditions and the Price List;
 - to be aware that the Bank will transfer the Cardholder's personal data to the Insurer chosen by the Bank, who will process his/her personal data for the purpose of finalising and implementing travel and related risk insurance contracts, and that such transfer of personal data is necessary to provide travel insurance service to the Cardholder and for conclusion and performance of travel insurance contract (applicable only, if the Card is chosen with travel insurance).

Card holder's signature	Date
_____	_____

Client's signature	Bank's signature
_____	_____

- MC Corporate Gold
 MC Corporate Classic
 with travel insurance
 without travel insurance

CARD HOLDER

Name, Surname

Personal ID

Phone number
for receiving security code

Full name on the card (up to 22 characters)

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Card holder's signature

Date

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 MC Corporate Classic
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CARD HOLDER

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Card holder's signature

Date

Client's signature

Bank's signature

- MC Corporate Gold
 MC Corporate Classic
 with travel insurance
 without travel insurance

CARD HOLDER

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E.g. +370 5 222 33 44

Full name on the card (up to 22 characters)

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Card holder's signature _____ Date _____

Client's signature

Bank's signature

CARD DELIVERY

bank branch

card delivery service*

branch name

street, house/apartment number, city, door code

Card recipient

position, name, last name, phone number

* The service is only provided to clients who have submitted the Application using E-document module.

I hereby confirm that I am aware that the fee specified in the Pricelist will be applied after ordering the card delivery service, which will be credited from the Client's bank accounts, if needed, by converting funds present in them into euro according to the non-cash funds sales rate established by the Bank which is valid on the date of crediting the funds from the account(s). In case there are no funds for crediting the card delivery fee in the Client's bank accounts, the card delivery service will not be provided.

CLIENT'S SIGNATURE

We confirm that all the aforementioned information, including the information specified by the card owners, is thorough and correct. We also confirm that the card owners have signed this application to issue a business card (s) in front of the client's responsible person who has signed the application and that their identity has been established according to the valid personal identification documents. We assume all responsibility and undertake to compensate the losses and expenses incurred by the Bank if the information specified in the application appears to be incorrect.

Client

Seal

full name and signature

TO BE FILLED BY BANK

Danske Bank A/S Lithuania Branch

Branch

Section

Application accepted by

Date

full name, position and signature of employee