

B1

APPLICATION

No. _____

**ON ISSUE OF RIETUMU BANKA PRIVATE PAYMENT CARD
MASTERCARD/VISA**



JSC Rietumu Banka / Vešetas 7 / Rīga / LV-1013 / Latvia
UR No. 40003074497 / RTMBLV2X / REUTERS: RIET
Phone +371 67025555 / Fax +371 67025588
info@rietumu.lv / www.rietumu.com
Approved by Board of JSC "Rietumu Banka", Minutes No. 7, February 20, 2009

Complete in BLOCK CAPITALS

____/____/20__

Customer _____
(name, surname)

I herewith apply for Rietumu Banka's MasterCard / VISA payment card(s).

Rietumu Banka opens a card account and issues international payment cards linked to this account to the Customer and the Cardholders authorised by the Customer.

Card Type: MasterCard VISA
Light Classic Gold Platinum
Card Account Currency: LVL EUR USD
Insurance for Classic card: Yes No

■ **Principal Cardholder**

Name and surname to be embossed on your card _____
(Name and surname on the card shall not exceed 21 characters, including spaces. Soft signs and length marks are not displayed on the card)

Voice password for phone contacts _____
(At least 5 characters long, Latin letters, no spaces or dashes allowed)

■ **Additional cardholder *** Name _____ Surname _____
* Please, fill in the appendix "Additional Cardholder"

Passport No./ ID document No. _____ ID number _____

■ **Additional cardholder *** Name _____ Surname _____
* Please, fill in the appendix "Additional Cardholder"

Passport No./ ID document No. _____ ID number _____

Employer (Company name) _____

Your net monthly income _____ Currency _____
(Latvian residents only)

■ **Information about credit limit and collateral**

Card without collateral Card against collateral

Specify collateral type:

Security deposit: _____ (Amount) _____ Currency _____ Deposit currency have to match card account currency

Term deposit in Rietumu Banka: _____ (Amount) _____ Currency _____ Term _____/_____/_____

Term deposit account No. with Rietumu Banka: _____

Third party guarantee: _____
(name, surname or company name)

Current Account No. with Rietumu Banka: **LV** _____ **RTMB** _____

other collateral _____

I will spend only the funds that are available on my card account I wish to avail of credit limit facility: Amount _____ Currency _____
(It is required to conclude a "Credit Limit Granting and Service Agreement")

In case you wish to set the daily limit of card transactions BELOW the limit set by the Bank, please, specify it herein:

Cash withdrawals _____ (amount) _____, other payments _____ (amount) _____ Currency _____

Delivery of card account statements: M-Bank (only via e-mail) (need to fill in an application form) No statements required by post to residential or correspondence address (Please, underline as appropriate)

Key _____ X _____
(signature)

Delivery of the issued cards and PIN code envelopes:

in Rietumu Bank _____
(please specify a representative office or the head office in Riga)

Please issue the card to in person to the authorised person:

Name _____ Surname _____

ID Code / Passport No _____ Contact telephone _____

Please send by international express mail to address:
street, number, apartment _____ City _____

Country _____ Postal Code _____ Contact telephone for courier _____

Please charge to my Current Account No. **LV** _____ **RTMB** _____ in Rietumu Banka

the following commission fees Fee for express issue of the Card Courier delivery fee (Card and PIN)
 Annual fee(s) for Card(s) Other _____

I hereby confirm terms and conditions of JSC Rietumu Banka and Customer Agreement are clear and understandable to me. I undertake full financial responsibility for these persons. I undertake to notify Rietumu Banka of any changes related to this Application. I agree that the Bank may charge any of my accounts in the Bank for setting card debt. Please accept documents containing my signature corresponding to signature specimen below.

Customer _____ (name, surname) **X** _____ (signature)

Rietumu ID _____ **Key** _____

FOR BANK USE ONLY

I confirm the identity and signature of the Customer or the Customer's authorised representative.

Passport No./ ID document No. / ID number _____

The Bank's representative _____ (name, surname) _____ (signature) _____ / ____ / 20__

Card account No. **LV** _____ **RTMB** _____

Tariff type _____ Collateral _____

The Bank's representative _____ (name, surname) _____ (signature) _____ / ____ / 20__