

CUSTOMER APPLICATION FORM

CORPORATE / ORGANISATIONS / ENTITY

Please complete all fields of the application by selecting the required option and using the drop down fields. Include certified and translated copies of supporting documents required to confirm the Entity's statutory documents, address and other details as described at the end of this form.

Upon completion, the Entity's representatives are required to submit this application and ancillary documentation to one of our branches or, to a Commercial Business Unit representative.

ENTITY DETAILS

Entity Name:		Official Reg. No.:	
Entity Trading as: <i>(if different from Entity Name)</i>			Not applicable <input type="checkbox"/>
Type of Entity:	Company <input type="checkbox"/>	Partnership <input type="checkbox"/>	Foundation <input type="checkbox"/> Organisation/Association <input type="checkbox"/>
Ownership:	Public <input type="checkbox"/>	Private <input type="checkbox"/>	
Legal Status:	In Formation <input type="checkbox"/>	Registered <input type="checkbox"/>	In Dissolution/Liquidation <input type="checkbox"/>
Registered in:	Malta <input type="checkbox"/>	Other Country <i>(please specify)</i> <input type="checkbox"/>	
Economic Sector:			
Economic Sector - Sub Section:			
VAT No.: <i>(If Applicable)</i>		Incorporation/Founding Date: DD/MM/YYYY	
Does the Entity Form Part of a Group?: <i>(If Yes, please provide the Group Corporate Structure)</i>		Y <input type="checkbox"/> N <input type="checkbox"/>	
Parent/Holding Company <input type="checkbox"/>		Subsidiary <input type="checkbox"/> Associate <input type="checkbox"/> Other <input type="checkbox"/>	
Are any of the Entity's shares held under fiduciary capacity:		Y <input type="checkbox"/> N <input type="checkbox"/>	
Number of Branches/Outlets/Offices/Locations <i>(Including Main Office):</i>			
Number of Employees/Members:			
Do the Entity's constituting documents (eg. M&As) allow for the issuance of bearer shares?		Y <input type="checkbox"/> N <input type="checkbox"/>	
Does the Entity have economic substance or connection to Malta?		Y <input type="checkbox"/> N <input type="checkbox"/>	
Is Entity acting as a Guarantor? Y <input type="checkbox"/> N <input type="checkbox"/>		Are Accounts Required? Y <input type="checkbox"/> N <input type="checkbox"/>	
How were you introduced to APS?:	Response to Advertising <input type="checkbox"/>	Convenient Location <input type="checkbox"/>	Recommended by Bank Client <input type="checkbox"/>
	Recommended by Introducer <i>(please specify)</i> <input type="checkbox"/>		

ENTITY ADDRESSES

REGISTERED ADDRESS	Building/Office No.:	Street:
City:	Post Code:	Country:
Does the Entity Operate from the Registered Address?:		Y <input type="checkbox"/> N <input type="checkbox"/> <i>(If No, Complete Operational Address)</i>
OPERATIONAL ADDRESS	Building/Office No.:	Street:
City:	Post Code:	Country:
Use Entity Registered Address for Communication:		Y <input type="checkbox"/> N <input type="checkbox"/> <i>(If No, Complete Mailing Address)</i>
MAILING ADDRESS	Building/Office No.:	Street:
City:	Post Code:	Country:
Entity Tel No.:	Additional Tel No.:	
Mob No.:	E-Mail:	
Entity Website: <i>(if none held, write N/A)</i>		
Preferred Banking Channel:	ATM <input type="checkbox"/>	Phone <input type="checkbox"/> Branch <input type="checkbox"/> Internet/Mobile Banking (myAPS) <input type="checkbox"/>

FOR OFFICE
USE ONLY

Entity Profile No.:	Account Designation:
Entity Representative is Physically Present: Y <input type="checkbox"/> N <input type="checkbox"/>	Wealth Client: <input type="checkbox"/>
Branch:	Date: DD/MM/YYYY
Bank Official:	Authorised:



Applicant Initials _____

ACCOUNT PREFERENCES

The Entity wishes to apply for the the following account(s) with the requested preferences (Tick your request)

Account Type	New Bank Account ⁽²⁾	Currency	Final Withholding Tax ⁽³⁾		Statement Frequency ⁽¹⁾		Client's Current Account ⁽⁶⁾
			Deduct ⁽³⁾	Do not deduct ⁽⁴⁾	Annually	Monthly	
Current Account ⁽¹⁾	<input type="checkbox"/>	EUR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Savings Account ^{(1)(5a/b)}	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Term Deposit Account ^{(1)(5a)}	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1) Subject to terms and conditions. Applicable interest rate is officially published by the Bank for the product requested, on the effective date when account is opened or renewed. The interest rates are published on the Bank's website apsbank.com.mt/interest-rates and available at branches. Submit this form with corresponding CA03-Connected Party Application Form and Appointment of Banker's form.

2) Should application to open bank account/s be approved, the requested preferences will be applied.

3) The bank will deduct the 15% Final Withholding Tax on the interest earned on the accounts marked.

4) I/We choose to receive Interest in Full on the selected account/s and not through the current 15% Final Withholding Tax. I/We hereby declare that the tax will be paid by the Entity and I/we also authorise the Bank to inform the Commissioner for Revenue of the amount of interest earned each calendar year.

5) Accounts can be opened in the following currencies : (a) EUR, GBP, USD, AUD, CAD and (b) DKK, SEK, NOK, JPY, CHF.

6) Applicable only to Subject Persons who are registered as such with the FIAU.

CHEQUE BOOK

If you are applying for a **Current Account**, would you like a chequebook?: Y ☐ N ☐

You will be provided with one chequebook of 20 pages which will be posted to the address provided for communication in this application.

TERM DEPOSIT ACCOUNT

Only applicable in case of Term Deposit Accounts, which can be opened for the following Duration: 7 Days, 1, 3 or 6 Months, 1, 2, 3, 4 or 5 Years

Duration:	<input type="text"/> Years <input type="checkbox"/> <input type="text"/> Month/s <input type="checkbox"/> <input type="text"/> Days <input type="checkbox"/>	Principal Amount:	CCY <input type="text"/>
Automatic Renewal:	Y <input type="checkbox"/> (The account will be automatically renewed for a further period upon such terms & conditions and interest rate prevailing at maturity date. You can increase/decrease funds within ten calendar days from maturity, according to the Bank's prevailing policy)		
	N <input type="checkbox"/> Upon maturity transfer capital to account: <input type="text"/> (Upon maturity, term deposit will be closed automatically and transferred to the indicated account)		
Interest Payment Method:	Transfer to account: <input type="checkbox"/> <input type="text"/>		Capitalisation <input type="checkbox"/>
Interest Payment Frequency:	Annually <input type="checkbox"/> Semi Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Upon Maturity <input type="checkbox"/> (When duration is less than 12 months, interest is only paid at maturity)		

SOURCE OF FUNDS

I/We, the undersigned declare that the expected source of funds utilised to initiate the banking relationship with APS is derived from the following:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Shareholder Funds | <input type="checkbox"/> Directors/Shareholder Loan | <input type="checkbox"/> Donations | <input type="checkbox"/> Bank Finance |
| <input type="checkbox"/> Trading Income | <input type="checkbox"/> Sale of Property/Assets | <input type="checkbox"/> Inheritance/Grant | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> Investments | <input type="checkbox"/> Rental Income | <input type="checkbox"/> Subscriptions | <input type="text"/> |

From which country(ies) has Source of Funds been acquired?:

Applicant Initials

SOURCE OF WEALTH - ENTITY ASSETS

I/We, the undersigned declare that the Entity has acquired its Assets from:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Shareholder Funds | <input type="checkbox"/> Directors/Shareholder Loan | <input type="checkbox"/> Donations | <input type="checkbox"/> Bank Finance |
| <input type="checkbox"/> Trading Income | <input type="checkbox"/> Sale of Property/Assets | <input type="checkbox"/> Inheritance/Grant | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> Investments | <input type="checkbox"/> Rental Income | <input type="checkbox"/> Subscriptions | <input type="text"/> |

From which country(ies) has Source of Wealth been acquired?:

YOUR ACTIVITY

Main currencies utilised: EUR ☐ GBP ☐ USD ☐ Other

How will you be transacting with the Bank?: Branch ☐ Electronic/Digital Channels ☐

Transactions will be made in: Cash ☐ Non-Cash ☐

DEPOSITS

Normal method of deposits: Bank Deposit Machine ☐ Cash ☐ Cheques ☐ Inter Bank Transfer ☐

Approximate number of anticipated cash deposits per month: 0 ☐ 1-5 ☐ 6-10 ☐ 11-15 ☐ 16-20 ☐ >20 ☐

Approximate cumulative value of anticipated cash deposits per month €

Approximate number of anticipated non-cash deposits per month: 0 ☐ 1-5 ☐ 6-10 ☐ 11-15 ☐ 16-20 ☐ >20 ☐

Approximate cumulative value of anticipated non-cash deposits per month €

Annual Turnover: (Total Annual Deposits) €

WITHDRAWALS

Normal method of withdrawals: ATM ☐ Cash ☐ Cheques ☐ Inter Bank Transfer ☐

Approximate number of anticipated cash withdrawals per month: 0 ☐ 1-5 ☐ 6-10 ☐ 11-15 ☐ 16-20 ☐ >20 ☐

Approximate cumulative value of anticipated cash withdrawals per month €

Approximate number of anticipated non-cash withdrawals per month: 0 ☐ 1-5 ☐ 6-10 ☐ 11-15 ☐ 16-20 ☐ >20 ☐

Approximate cumulative value of anticipated non-cash withdrawals per month €

Which countries will the Entity be trading with? Malta ☐ EU/EEA ☐ Non-EU ☐
(If EU/EEA or Non-EU, select countries)

Main Purpose or Trade:

Type of Income/Contributions: (Only fill this if you are a Foundation or Organisation/Association)

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YOUR ACTIVITY - CONTINUED

Services/Products/Activities Offered:

Business Location

Persons/organisation/suppliers from which the Entity expects to receive Incoming Payment Orders:

Country

Persons/organisation/suppliers to which the Entity expects to send Outgoing Payment Orders:

Country

Entity holds or has previously held accounts with the following bank(s):

☐ Local Bank (please specify)

☐ Foreign Bank (please specify)

☐ No other bank accounts held

Will you be switching your banking relationship to APS?:

Y ☐ N ☐

Have you ever been refused a banking relationship? (If yes, please provide the reason)

Y ☐ N ☐

Have you ever had a banking relationship terminated? (If yes, please provide the reason)

Y ☐ N ☐

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COMMON REPORTING STANDARD ("CRS")

	Country of TAX Residence	TIN (Tax Identification Number)
1		
2		
3		

FINANCIAL INSTITUTIONS:

- ☐ a) Financial Institution - Investment Entity
- ☐ i. An Investment Entity Located in a Non-Participating Jurisdiction and Managed by another Financial Institution
- ☐ ii. Other Investment Entity

- ☐ b) Financial Institution - Depository Institution, Custodial Institution or Specified Insurance Company

If you ticked (a) or (b), please provide the Global Intermediary Identification Number (GIIN):

NON-FINANCIAL ENTITY (NFE):

- ☐ c) Active NFE - A corporation, the stock of which is regularly traded on an established securities market or a Corporation which is a related Entity of such a corporation.

If you ticked (c), please provide the established security market on which the corporation is regularly traded:

If applicable, provide the name of related Entity which is a regularly traded corporation:

- ☐ d) Active NFE - A Government Entity or Central Bank
- ☐ e) Active NFE - An International Organisation
- ☐ f) Active NFE - Other than (c) - (e) above (example a start-up NFE or a non-profit NFE)
- ☐ g) Passive NFE

If you have ticked (a)(i) or (g) above, please indicate the names of any Controlling Person(s) (Please complete CRS-CP form - apsbank.com/mt/en/document-downloads):

UNITED STATES OF AMERICA TAX LIABILITY ("FATCA")

Please complete the following by ticking one of the following boxes as applicable. If the Entity has connections with the US by having one or more of the below indicia or has US controlling persons, complete either the [W-8BEN-E](#) or [W-9](#) form. Kindly seek tax advice in case of difficulty.

- ☐ I hereby declare that the Entity is classified as non-US Person and therefore non-US tax resident.
- ☐ I hereby declare that the Entity is classified as Passive NFFE with one or more US citizens/residents as Controlling Person(s). (Please complete CRS-CP form - apsbank.com/mt/en/document-downloads)
- ☐ I hereby declare that the Entity is classified as a US person and therefore US tax resident and has one or more of the following US indicia:
- ☐ US Place of Incorporation ☐ US Residence/Mailing Address ☐ US Telephone Number

POLITICALLY EXPOSED PERSON (“PEP”)

In terms of the Prevention of Money Laundering Act and the Prevention of Money Laundering and Funding of Terrorism Regulations, the Bank is required to establish whether any individual who is in the Entity as a Director, Shareholder or Beneficial Owner (or their equivalent) is or has been a “Politically Exposed Person [“PEP”] for the past 3 years when entering into a Banking Relationship or executing a Transaction.

a) Does the Entity have any PEP involvement within its ownership structure (Beneficial Owner, Shareholder, Key Controllers) and/or directorship? *(Please tick as appropriate)*

- ☐ No active and relevant PEP involvement
- ☐ Yes, the Entity has active and relevant PEP involvement
- ☐ Yes, has connected parties (Individuals) holding a prominent public function (active PEP involvement)
- ☐ Yes, has connected parties (Individuals) who is an immediate family member of PEP
- ☐ Yes, has connected parties (Individuals) who is a close associate of a PEP

b) If Yes, to any of the above, please mark relevant PEP Section in Connected Party Section below.

ENTITY REPRESENTATIVES (THE ENTITY REPRESENTATIVES WILL BE THE CONTACT PERSONS WHEN PROCESSING THIS FORM. ADDITIONALLY, ALL FUTURE BANKING COMMUNICATIONS WILL BE ADDRESSED TO THE ENTITY REPRESENTATIVES)

First Name:		Middle Name:		Surname:	
Date of Birth:		Place of Birth:			
Nationality:		Citizenship:			
Mob No.:		E-Mail:			
Role(s) in Entity:					
Beneficial Owner/Controlling Person Type:		Voting Rights %:		Ownership %:	
Permanent Residential Address	House/Apt.No.:		Street:		
City:		Post Code:		Country:	
ID Type:		Country of Issue:			
ID No.:	Document Issue Date: DD/MM/YYYY		Document Expiry Date: DD/MM/YYYY		
Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/> Profile No.: <i>(Office Use Only)</i>					
First Name:		Middle Name:		Surname:	
Date of Birth:		Place of Birth:			
Nationality:		Citizenship:			
Mob No.:		E-Mail:			
Role(s) in Entity:					
Beneficial Owner/Controlling Person Type:		Voting Rights %:		Ownership %:	
Permanent Residential Address	House/Apt.No.:		Street:		
City:		Post Code:		Country:	
ID Type:		Country of Issue:			
ID No.:	Document Issue Date: DD/MM/YYYY		Document Expiry Date: DD/MM/YYYY		
Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/> Profile No.: <i>(Office Use Only)</i>					

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CONNECTED PARTY INFORMATION (PLEASE LIST ALL CONNECTED PARTIES TO THE ENTITY)

The following information is required for each Director, Shareholder (including Minority Shareholders), Partner, Administrator, Executive Committee Member, Beneficial Owner, Key Controller or equivalent. All Voting Rights % and Ownership % are to be included where applicable.

First Name:			Middle Name:			Surname:		
Date of Birth:			Place of Birth:					
Nationality:			Citizenship:					
Role(s) in Entity:								
Beneficial Owner/Controlling Person Type:			Voting Rights %:			Ownership %:		
Permanent Residential Address		House/Apt.No.:		Street:				
City:		Post Code:		Country:				
ID Type:		Country of Issue:		ID No.:				
Document Issue Date:		Document Expiry Date:		Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/>				
(Office Use Only) Profile No.:			Update of details: Performed, information updated <input type="checkbox"/> No updates required <input type="checkbox"/>					
First Name:			Middle Name:			Surname:		
Date of Birth:			Place of Birth:					
Nationality:			Citizenship:					
Role(s) in Entity:								
Beneficial Owner/Controlling Person Type:			Voting Rights %:			Ownership %:		
Permanent Residential Address		House/Apt.No.:		Street:				
City:		Post Code:		Country:				
ID Type:		Country of Issue:		ID No.:				
Document Issue Date:		Document Expiry Date:		Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/>				
(Office Use Only) Profile No.:			Update of details: Performed, information updated <input type="checkbox"/> No updates required <input type="checkbox"/>					
First Name:			Middle Name:			Surname:		
Date of Birth:			Place of Birth:					
Nationality:			Citizenship:					
Role(s) in Entity:								
Beneficial Owner/Controlling Person Type:			Voting Rights %:			Ownership %:		
Permanent Residential Address		House/Apt.No.:		Street:				
City:		Post Code:		Country:				
ID Type:		Country of Issue:		ID No.:				
Document Issue Date:		Document Expiry Date:		Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/>				
(Office Use Only) Profile No.:			Update of details: Performed, information updated <input type="checkbox"/> No updates required <input type="checkbox"/>					
First Name:			Middle Name:			Surname:		
Date of Birth:			Place of Birth:					
Nationality:			Citizenship:					
Role(s) in Entity:								
Beneficial Owner/Controlling Person Type:			Voting Rights %:			Ownership %:		
Permanent Residential Address		House/Apt.No.:		Street:				
City:		Post Code:		Country:				
ID Type:		Country of Issue:		ID No.:				
Document Issue Date:		Document Expiry Date:		Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/>				
(Office Use Only) Profile No.:			Update of details: Performed, information updated <input type="checkbox"/> No updates required <input type="checkbox"/>					
First Name:			Middle Name:			Surname:		
Date of Birth:			Place of Birth:					
Nationality:			Citizenship:					
Role(s) in Entity:								
Beneficial Owner/Controlling Person Type:			Voting Rights %:			Ownership %:		
Permanent Residential Address		House/Apt.No.:		Street:				
City:		Post Code:		Country:				
ID Type:		Country of Issue:		ID No.:				
Document Issue Date:		Document Expiry Date:		Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/>				
(Office Use Only) Profile No.:			Update of details: Performed, information updated <input type="checkbox"/> No updates required <input type="checkbox"/>					
First Name:			Middle Name:			Surname:		
Date of Birth:			Place of Birth:					
Nationality:			Citizenship:					
Role(s) in Entity:								
Beneficial Owner/Controlling Person Type:			Voting Rights %:			Ownership %:		
Permanent Residential Address		House/Apt.No.:		Street:				
City:		Post Code:		Country:				
ID Type:		Country of Issue:		ID No.:				
Document Issue Date:		Document Expiry Date:		Politically Exposed Person: Y <input type="checkbox"/> N <input type="checkbox"/>				
(Office Use Only) Profile No.:			Update of details: Performed, information updated <input type="checkbox"/> No updates required <input type="checkbox"/>					

Please indicate number of additional pages included to provided Connected Party information.

Total Additional Pages included: (excluding this page)

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DATA PROTECTION AND MARKETING

Data Protection Notice	The Entity confirms that they have read, understood and acknowledged the Data Protection Notice.	<input type="checkbox"/>
Privacy Preference: Direct Marketing, Profiling & Research	The Entity hereby gives consent to receive the following from APS: <i>(Tick the appropriate box)</i> Marketing communication by post, email, SMS or other electronic messages (such as online and internet banking messages) relating to information on APS Bank's products and services.	Y <input type="checkbox"/> N <input type="checkbox"/>
	In market research organised by the Bank, such as surveys and focus groups.	Y <input type="checkbox"/> N <input type="checkbox"/>

Consent Withdrawal: You may withdraw your consent from direct marketing at any time by sending an email request on marketing@apsbank.com.mt or via post (APS Bank plc, F.A.O. MARKETING Department, APS Centre, Tower Street, Birkirkara BKR 4012 Malta).

MERCHANT ACQUIRING SERVICES

☐ I am hereby authorising APS Bank plc to share the fact that the Entity is its customer and the following details with the *Merchant Acquirer for the purpose of the Entity being offered merchant acquiring services. I hereby confirm that I am duly authorised to give consent on behalf of the Entity.

- Trading As Name/Full Registered Entity Name
- Registered Address
- VAT Number/Entity Registration Number
- Email Address
- Contact Number

* The Merchant Acquirer is a third-party entity with which APS Bank plc has a contractual relationship. I understand that the Bank's role is solely to introduce the Entity to the Merchant Acquirer after having obtained my permission and authorisation through this Form to do so. The Bank will not be party to, nor have any control over any services which I may acquire, or any agreements or arrangements whatsoever which I may enter into with the Merchant Acquirer. The Entity hereby agrees that the Bank shall not be responsible in any way or manner in relation to any services which I may acquire, or any agreements or arrangements, whatsoever which I may enter into with the Merchant Acquirer, and/or for any claim (whether data protection related or otherwise).

Consent Withdrawal & Acknowledgements:

- ☐ By ticking this box, I acknowledge that I may withdraw my consent at any time, by sending an email request to echannelsdigitalteam@apsbank.com.mt
- ☐ By ticking this box, I acknowledge that I shall be contacted directly by the Merchant Acquirer via email or phone, as a separate Data Controller, to be offered merchant acquiring services.

APPLICATION DECLARATIONS

I/We, the undersigned, on behalf of the Entity hereby:

- Confirm that all the Information provided to the Bank on this form is true, complete and up-to-date, and acknowledge that the Bank is entitled to close the Account(s) if the information provided information is found to be incorrect.
- Declare that I/we have been duly authorised by the Entity to open the Profile and Account(s) as per Constituting documents or Entity resolution.
- Affirm that all the deposits in the Entity's Account(s) are derived from legitimate activities.
- Acknowledge that the Bank shall not be held responsible in any manner whatsoever for any incorrect, incomplete or omitted information provided by means of this form.
- Affirm that the Constituting Documents of the Entity provided to the Bank are the most recent versions.
- Confirm that there are no other persons, other than those mentioned in the Constituting Documents of the Entity who exercise some form of control over the Entity and/or over its Management.
- Confirm that there are no Bearer Shares held directly, or indirectly through holding entities, and that no interest is held in the applicant Entity, directly or indirectly, as trustee, nominee or by way of other fiduciary relationship.
- Declare that the Funds that are deposited in the Account(s) belong exclusively to the Entity and are not held by it for another person, directly or indirectly, as trustee or nominee or in a fiduciary capacity, and undertake to immediately inform the Bank in writing whenever this is not the case.
- Undertake to immediately inform the Bank in writing in the eventuality that the Entity starts dealing in areas of operation that are not listed in the Constituting Documents of the Entity.
- Confirm that all funds that are deposited in the Account(s) with the Bank are in line with the company's nature of business and activities as detailed in the company's Memorandum and Articles of Association.
- Undertake to immediately inform the Bank in writing in the eventuality that the Entity:
 - Stops providing any of the above Services / Products and/or from new Location(s); or
 - Starts providing new Services / Products and/or from new Location(s).
- Agree to cooperate with the Bank in writing in the eventuality that it requires further Documentation and/or Information about the Entity and/or about any Transaction/s in which it might be involved including Documentation and/or information relating to its clients, members, sponsors and beneficiaries, and or/any Transaction/s in which these might be involved.

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- Declare that the Entity will not have any relationship and/or connection with any business that does not conform to the Bank's commercial ethics and principles, including but not limited to, business involved in Adult Entertainment, Casinos, Gambling and Betting establishments, Gaming-related Business including Online Betting or Organisations or Companies that have been set up for facilitating such activities.
- (If Entity is a Company or Partnership) Declare that the percentages of Shareholding shown in the Company's Memorandum & Articles of Association / the Partnership's Deed of Partnership / Partnership Agreement reflect both the voting rights held, and the control exercised, by the Shareholders and the Ultimate Beneficial Owners / Partners and the Individual Contributors / Ultimate Individual Owners.
- (If Entity is a Foundation or Voluntary Organisation) Undertake to immediately inform the Bank in writing in the eventuality that the scope of the Foundation / Voluntary Organisation changes from that disclosed above and /or is not one listed in the Deed / Statute / Constituting Document.
- Declare that the Entity is aware that for reasons arising out of regulatory and/or legislative requirements, the Bank may carry out checks and verifications on the Entity itself and on entities/individuals who are considered to be connected parties. Connected parties may include Directors, Shareholders, Ultimate Beneficial Owners, Partners, Individual Contributors, Administrator(s), Committee Member(s), Board Members, Persons who endowed the Foundation, Assignee of Founder's Rights/Assignee of Assets of Foundation and Signatories to accounts. To this effect, the Entity confirms that it has notified it's Connected Parties i) of these checks and verifications and ii) that information processed in connection to such checks for this application and profiling process may be divulged to the Entity and to third parties as provided in the Bank's Privacy Policy.
- Confirm that the only Individuals involved in the Entity who are Politically Exposed Persons are those indicated on the form. The Entity undertakes to immediately inform the Bank in writing in the eventuality of any changes in this respect.
- Undertake to immediately inform the Bank if any of the Information provided in this form becomes outdated and/or is no longer correct, including changes in the Entity's Constituting Documents, the Governance / Corporate Structure, the Ultimate Beneficial Owners, the Officials and/or the Signatories.
- Acknowledge that the Bank shall not be held responsible in any manner whatsoever in the event that the Entity fails to immediately inform the Bank if any Information provided by means of this form becomes outdated and/or is no longer correct.
- Acknowledge that the Bank has the right to periodically review:
 - The Entity's setup and the operation of the Account(s) for Compliance purposes, and that it may request any further Documentation and/or Information, including but not limited to, details about the Entity, Officials, Directors, Shareholders, Ultimate Beneficial Owners and/or Signatories (or equivalent roles).
 - The banking relationship, and in its total and absolute discretion, to take any decision that it deems necessary, including terminating this banking relationship without the obligation on the part of the Bank to provide any explanation for its decision.
- Acknowledge that Information about the Entity and its Account(s) may be put onto the Bank's database and used, analysed and assessed by the Bank to provide the Entity with a better service. Apart from the Bank, this information including the nature of transactions will be disclosed to Third Parties in order to provide the Entity with the service applied for, for marketing purposes (if applicable), for the purpose of fraud prevention and compliance with applicable guidance, regulations and legislation, for audit and debt collection and to enable services to be processed for the Bank in Malta and abroad.
- Acknowledge that the information contained in this form and information regarding the Entity and any reportable Account(s) may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the account holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.
- Authorise the Bank to debit the Entity's Account with any charges that may be incurred to retain the banking relationship and while using the accounts and services applied for New Applications, Periodical Compliance Reviews and the Monthly non-Compliance Fee - where applicable as per the Bank's Tariff of Charges.
- Confirm that no funds derived directly or indirectly from crowdfunding will be deposited in the Entity's accounts held with the Bank.
- Obtain the Bank's prior written consent before disclosing the Entity's accounts held with the Bank on any broadcasting medium (including social media), in connection to any fund-raising activity.

Whilst the Bank may periodically request the Entity to re-confirm details, in this form, the Entity should inform the Bank immediately should any information in this form change.

I hereby confirm that I have read and understood the Data Protection Notice below and that I have read, understood and accepted the entire Terms & Conditions, Depositor Information Sheet, Fee Information Document and Tariff of Charges governing the requested products and services. I also acknowledge that when needed, I can collect a copy of the relevant Terms & Conditions, the full APS Data Privacy Policy, Depositor Information Sheet, Fee Information Document and Tariff of Charges from any APS Branch, which are also available from the Bank's website apsbank.com.mt/terms-and-conditions.

LEGAL REPRESENTATIVES:

(as per constituting documents)

Name & Surname
ID/Passport No.

Date

Signature

Role

Name & Surname
ID/Passport No.

Signature

Role

DOCUMENTATION REQUIRED

Together with this application, further documentation is required to open a deposit account. The list of documentation can be found on apsbank.com.mt/business (under the **Relevant Documents** section).

Document Guidelines

- All documents must be valid and presented in original form. Should copies be presented, these must be certified by a lawyer, notary or accountant as follows: "Certified True Copy of Original Document" – signed by the certifier and include a stamp of the certifier's full name, profession, date, and contact details.
- Individual submitting application must present a valid Identity Document. Identity Document copies (front and back) must be clear and in colour.
- The Bank may require additional documentation or information to fulfil its Due Diligence obligations.
- Any document which is not in Maltese or English must be translated. The translation should be signed, dated, and certified by an independent person of proven competence confirming that it is a faithful translation of the original.
- Identity Document and CA03-Connected Party Application form are required for the applicable roles, as noted in the **Relevant Documents** section.

DATA PROTECTION NOTICE

We at APS Bank plc (C 2192) of APS Centre, Tower Street, Birkirkara, Malta, take every measure to ensure that your privacy is one of our topmost priorities. Please take the time to read through the below, which is applicable to you insofar as you are a data subject as understood by the EU General Data Protection Regulation (2016/679), briefly explaining how we process your personal data, before submitting the above form.

WHY WE NEED YOUR PERSONAL DATA - We need your and/or your child's personal data (the information you have provided to us in the application form above that identifies you or your child as an individual) to provide you with the requested services, namely to set up a bank account with us and/or to further provide you with the services you applied for above and other processing operations, including for the purpose of fraud prevention and compliance with regulations and legislation to which we are subject. Therefore, in this case, our **legal bases** for processing the said personal data are **necessity for the performance of a contract with you and our compliance with our legal obligations**. In the event that you or your child (where applicable) are applying for Merchant Acquiring Services, marketing communications and/or to participate in market research as listed in the relevant Sections of the form above, the legal basis we rely upon for processing the said personal data is your explicit **consent**. Where the Bank places marketing phone calls, such processing shall be necessary for the purposes of the **legitimate interests** pursued by the Bank.

YOUR CONSENT CAN BE WITHDRAWN AT ANY TIME by contacting us as explained in the relevant Section above. However, do note that withdrawing consent will mean you no longer receive direct marketing and/or market research communications from us containing our latest offers. In the case of **Merchant Acquiring Services**, your withdrawal of consent will only be effective if we have not yet transferred your personal data to the Merchant Acquirer in which case, we will ensure to not effect such transfer.

WHO WE SHARE YOUR PERSONAL DATA WITH - Your and/or your child's personal data will be made available to those people in the bank who need it to carry out their duties and provide you with the services you expect from us. We also share it with:

- Other entities within the APS group and/or any sub-contractors, agents or service providers we may have appointed who carry out services for us either now or in the future (including their employees, sub-contractors, service providers, agents, directors and officers);
- Merchant Acquirers as explained in the section "**Merchant Acquiring Services**" in the form above where you have given us your consent to do so;
- Third party marketing and printing companies for the purpose of carrying out survey, printing and communicating promotional material on our behalf where you have given us your consent to do so;

Applicant Initials _____

- Any joint account holders, trustees, beneficiaries, guarantors, pledgors, originators, distributors, administrators, authorized attorneys appointed, fund managers, custodians, curators or executors;
- People you make payments to and receive payments from;
- Other financial institutions, tax authorities, trade associations, credit reference agencies, payment service providers, insurance agencies and debt recovery agents;
- Your beneficiaries, intermediaries, correspondent and agent banks, clearing houses, clearing or settlement systems;
- To correspond with and/or seek assistance from lawyers, architects, surveyors and other third parties as necessary;
- Law enforcement, government, courts, dispute resolution bodies, our regulators, auditors, advisors, consultants and any party appointed or requested by our regulators to carry out investigations or audits of our activities;
- The Central Bank of Malta to update the Central Credit Register maintained by it;
- Fraud prevention agencies who will also use it to detect and prevent fraud and other financial crime and to verify your identity;
- Other parties involved in any dispute, including disputed transactions;
- Anyone who provides instructions or operates any of your accounts, products or services on your behalf.

Your and/or your child's personal data will not be disclosed to any other persons besides those mentioned here unless we are required to do so by law.

HOW LONG WE KEEP YOUR PERSONAL DATA FOR – We will keep your and/or your child's personal data only as long as is necessary. Necessity is dependant on legal obligations we may have, as a bank or otherwise. For instance, we are legally obliged to keep any personal data that can be deemed as 'accounting records' for **ten years** from the date of closure of the account. Moreover, we are entitled to retain personal data in certain cases (as opposed to being obliged to do so). For example, when we believe that the personal data is necessary for us to defend ourselves against civil claims that may be brought against us, we are allowed to keep the data for as long as that risk subsists (usually **five years** from the end of our contractual relationship with you).

YOUR DATA PROTECTION RIGHTS – You and/or your child, as a 'data subject' as understood under applicable data protection laws, have a number of rights that are applicable **under certain conditions and in certain circumstances**, including Your:

- **Right of access** to your personal data processed by us;
- **Right to ask us to rectify** inaccurate personal data concerning you;
- **Right to have us erase your personal data ('right to be forgotten');**
- **Right to ask us to restrict** (that is, store but not further process) Your personal data;
- **Right to ask us to provide Your personal data to You in a structured, commonly used, machine-readable format, or (where technically feasible) to have it 'ported' directly to another data controller ('right to data portability')**
- **RIGHT TO WITHDRAW ANY CONSENT YOU MAY HAVE GIVEN US AT ANY TIME** (where processing is based on your consent) using the methods explained in the relevant Sections above;
- **Right to object** to our processing your personal data where the Bank relies on its legitimate interests, for example where the Bank places marketing phone calls as explained in this Data Protection Notice;
- **Right to lodge a complaint** with the relevant supervisory authority.

AUTOMATED DECISION-MAKING – The personal data you have provided us with in the above form will be subject to decisions concerning you and/or your child taken by automated means. These decisions concerning you (which possibly also include profiling) will be used for credit scoring purposes if you are applying for a loan or credit facility with us. To learn more about our automated decision-making processes in other instances, for example when digitally onboarding through myAPS, please refer to our full Privacy Policy.

WHERE CAN YOU READ OUR FULL PRIVACY POLICY? – This section represents a **condensed** explanation of how we use your personal information. For more information including more detail on your rights, we strongly recommend you read our user-friendly and layered full **Privacy Policy**, available here: apsbank.com.mt/en/qdpr you can ask us for a paper copy of the full Privacy Policy at any time upon request at any of our Branches.

If you have any questions or concerns regarding this Data Protection Notice or our Privacy Policy, you can contact our Data Protection Officer by sending an email to dataprotectionofficer@apsbank.com.mt or a letter to the Data Protection Officer, APS Bank plc, APS Centre, Tower Street, Birkirkara, BKR 4012, Malta.