

BluOr Bank AS | Smilšu iela 6, Rīga, LV-1050, Latvija | Registration No. 40003551060 | SWIFT code: CBBRLV22 Phone: +371 67 031 333 | E-mail: info@bluorbank.lv | www.bluorbank.lv

REGULAR PAYMENT EXECUTION APPLICATION

FILL IN USING BLOCK CAPITALS!

Client Information

Client		
	(For individuals - surname, name; for legal enti	ties - company name)
Payment I	Details	
Account from v	which the payment will be made:	
Current accoun	nt No. (IBAN): L V C B B R	
Payment amou	int:	
Fixed	Amount in digits	Currency code
	Amount in words	
All balance	es exceeding the amount stated in this Application	
	Amount in digits	Currency code
	Amount in words	
Please transfer	the specified payment amount according to this Regular Paym	nent Execution Application to the following details.
If the paym	nent cannot be made according to the parameters specified in t	his Application, please inform me via Internet Bank

Information on Beneficiary

Beneficiary owner	
(For individuals - surname, name; for legal entities - compar	ny name)
Registration No./Identity code/ Date of birth	
Address	Country code
Address	
Beneficiary's account No. (IBAN):	
Information to beneficial owner	External payment code
Beneficiary bank (Name)	
Address	Country code
Address	
Bank's code SWIFT, BLZ (Germany), ABA ROUTING (USA), SORT CODE (UK)	
Signature of the Client (Client's representative)	
Intermediary Bank Details	
Intermediary bank (Name)	
	Country code
Address	
Account No.	
Bank's code SWIFT, BLZ (Germany), ABA ROUTING (USA), SORT CODE (UK)	
Approved on 24.05.2018 Valid as of 25.05.2018 B2.1 - 999/03	Page 1 of 2

🛞 BluOr Bank	
BluOr Bank AS Smilšu iela 6, Rīga, LV-1050, L Phone: +371 67 031 333	.atvija Registration No. 40003551060 SWIFT code: CBBRLV22 E-mail: info@bluorbank.lv www.bluorbank.lv
	CONTINUATION
Payment type (This field is mandatory!) Sta	ndard Urgent Express
Commission OUR All the fees are provided in the fees of pro	aid by the sender BEN All the fees are paid by the beneficiary r Bank AS are paid by the sender, the fees of correspondent banks are paid by the beneficiary
Regular Payment Execution Application valid:	
From to Date dd/mm/yyyy Date	ate Recuring Single
First payment execution date Date	ld/mm/yyyy
With this Application I authorize BluOr Bank AS to p stated account and transferring it to the stated acco	erform regular payments by debiting the regular payment amount from the unt as follows:
Every banking business day (from 09:30am to 0	5:30pm)
Once a week (on the weekday when the first pay	ment was made (from 09:30am to 05:30pm))
Once a month (on the days when the first payme	ent was made (from 09:30am to 05:30pm))
Every (Please specify the number of days after which payme should be repeated)	day (from 09:30am to 05:30pm)
	r holiday, the payment will be executed on the next business day. ss and Services Pricelist, acknowledge them as binding, and undertake to
Surname, name of the Client (Client's representative)	
Signature of the Client (Client's representative)	(This field is mandatory!)

Digipass key (S) _________________(Please specify the key if this document will be signed and sent to the Bank electronically)

L.S.

Filled in by the Bank

No.		
Surname, name	-	
Signature	Date	L.S.