

BluOr Bank AS

Smilšu iela 6, Rīga, LV-1050, Latvija Phone: +371 67 031 333

Registration No. 40003551060

SWIFT code: CBBRLV22

www.bluorbank.lv

E-mail: info@bluorbank.lv

QUESTIONNAIRE FOR A DOMESTIC INDIVIDUAL

FILL IN USING BLOCK CAPITALS!

Dear Client.

Following the laws and regulations governing the activities of credit institutions in the Republic of Latvia, as well as international standards, we kindly request that you provide the necessary information. BluOr Bank AS, hereinafter referred to as the Bank, ensures compliance with regulatory requirements and guarantees confidentiality and non-disclosure of your data.

| 1. Client information | | Nama | | | 1.2 Dorognoli | dontity number | |
|--|-------------------------------------|--|------------------|---------------------------|----------------------|-----------------|--------------------|
| | | 1.2. Name 1.3. Personal identity number | | | | | |
| 1.4. Date of birthdd/mm/y | <u></u> | I.5. Country of | birth | | | | |
| 1.6. Declared place of reside | | | | Building N | lo./name | | Flat |
| City/Municipality | | | Postal code | | Country | | |
| 1.7. Actual residence: (if different from declared) | Street | | | Building N | lo./name | | Flat |
| City/Municipality | | | Postal code | | Country | | |
| 1.8. Are you a tax resident ir | the Republic of | Latvia? | Yes | No | | | |
| 1.9. Are you a tax resident ir | other countries | ? | No | Yes (Ple | ease specify bel | ow) | |
| Tax residence country | code, ta | xpayer No | | | | | - |
| Tax residence country | code , ta | xpayer No | | | | | - |
| 1.10. Are you a U.S. person? | No | Yes | (please fill out | the U.S. ta | axpayer identific | ation form) | |
| 1.11. Do you qualify as a Poli | tically exposed p | erson (PEP), o | r a PEP famil | y member | r, or a PEP clos | se associate? | |
| No | Yes, P | EP | Yes, a PEP | family me | ember | Yes, a close | associate of a PEF |
| 2.1. Occupation Salaried staff at | | | (Com | pany name, j | job title) | | |
| Entrepreneur | | | (Company | name, registi | ration No) | | |
| Self-employed pers | on | | | | egistration No.) | | |
| Student Re | etiree | Other | | | | | |
| 2.2. Average monthly incom | | | | | , ,, | | |
| 2.3. Information about inco | ning funds to yo | ur account | | | | | |
| Salary L | oans. | Inheritand | ce | Pensio | on and/or welf | are | Scholarship |
| Dividends/interest | | (Diago ango | ify commony non- | a and valation | n, source of interes | t naumanta) | |
| Income from leasing per | sonal property | (Please spec | лгу сотпрату пат | e and relation | n, source or interes | t payments) | |
| Income from movable preal estate transactions | roperty/ | | | | he property type a | | |
| Other | , | (Please specify the type of transaction) | | | | | |
| 2.4. Incoming funds are exp | ected from: | | (Please s | ресту) | | | |
| Latvia The E Liech | uropean Union a tenstein, Norway | nd/or Iceland, , Switzerland | Othe (Pleas | er countrie e specify) | es | | |
| 2.5. Are you planning transf | ers of financial in | nstruments? | No ` | /es | (pl | ease specify th | ne value EUR) |
| The transfer will be mad | le from a Latvian | credit instituti | ion/financial | institutior | า | | |
| The transfer will be mad | le from a foreign | credit instituti | on/financial | nstitution | 1 | | |



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CONTINUATION

2.6. Information about outgoing payments from your account?

Household and/or personal needs (Please specify) repayment

2.7. MONTHLY Current Account turnover

Total number of payments in your account (incoming and outgoing): (Must check one box only)

Up to 20 payments 20-50 payments More than 50 payments (specify the approximate number)

| Turnover of funds on the Client's account | Up to EUR 15,000.00 | From EUR 15,000.01 to EUR 50,000.00 | EUR 50,000.01 and more (specify the sum) |
|--|---------------------|--|--|
| Planned maximum turnover of incoming payments, including the maximum amount of a single incoming payment | | | EUR |
| Planned maximum turnover of outgoing payments, including the maximum amount of a single outgoing payment | | | EUR |
| Planned maximum volume of cash deposits, including ATM cash deposits | | EUR | |
| Planned maximum volume of cash withdrawals, including ATM cash withdrawals | | EUR | |

3. Information about cooperation with the Bank

3.1. Are you the manager or owner of a company that is an existing client of the Bank?

(a manager or owner (entrepreneur) is defined as an individual who, according to the data of the relevant state enterprise register, is the owner, beneficial owner, or authorized representative (member of the board or council, or procurator) of a current business client (legal entity) of the Bank))

| No | Yes | | | | |
|----|-----|--|--|--|--|
| | | (Please specify company registration number) | | | |

3.2. What Bank products/services do you plan to use?

I plan to open an account with a related company E-Commerce, POS terminals Asset management

Standard deposit over EUR 1000 Brokerage services Safe deposit boxes Subordinated deposit over EUR 1 000 Mortgage loan None of the above

Overnight deposit over EUR 5 000

3.3. How did you learn about our Bank?

Print media and publications From a cooperation partner Advertising on the internet

Advertising on radio, TV Outdoor advertising (billboards, Elsewhere

advertising on buses, trams, etc.) (please specify)

4. Confirmation

4.1. I confirm that:

- I am the true and actual owner of the funds in my accounts, and I do not intend to conduct transactions on behalf of or in the interests of third parties;
- The Current Account, as well as my other accounts with the Bank and the services provided by the Bank, will not be used for transactions related to illegal activity, funds obtained through illegal or criminal activities. Additionally, activities and transactions conducted in the Current Account and my other accounts will not violate sanctions/restrictions imposed by the Republic of Latvia and/or international organisations, nor will they breach transaction restrictions;
- I am aware that the Bank shall, in accordance with the requirements of the regulatory acts of the Republic of Latvia governing the information exchange process under FATCA and OECD CRS standards, process Client data and submit it to the State Revenue Service of the Republic of Latvia;
- I have listed all countries in which I am a tax resident;
- The information provided in this questionnaire and in the documents submitted to the Bank is complete and true; I am aware that I am liable under applicable laws in the event of providing false information. I undertake to promptly inform the Bank in writing of any changes to the information provided in this questionnaire;
- I am familiar with the terms used in this questionnaire and their explanations, which are available at https://www.bluorbank.lv/en/definitions and in the General Terms of Business.
- 4.2. I agree that the Bank has the right to verify the accuracy of the submitted information, and the Bank is entitled to request additional information and documents from me to verify the information provided in this form, including documents and information about me and my transactions. I also undertake to submit the requested documents and information upon the Bank's first request.
- 4.3. I certify and agree that if the questionnaire has been completed interactively in the electronic environment provided by the Bank — the Client's Cabinet, where actions (such as ticking a checkbox) have been performed, this constitutes giving consent and is considered an Electronic Signature in accordance with the General Terms of Business.

Approved on 19.11.2024 Valid as of 21.11.2024 T1/B2.1 - 3027/07 Page 2 of 3



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|---|--|---|--------|--|
| 5. Client ¹ | | CONTINUA | TION | |
| 5.1. Surname, name | | | | |
| 5.2. Signature | 5.3. Code calcula | tor (Digipass) key or Blue KEY (S) | | |
| 5.4. Place of signature(country, city) | | Date | | |
| a secure electronic signat or if the electronic document the box) signify giving cor | ure; has been completed interactively in the environment proves sent, and is considered an Electronic Signature in accordate. | able laws and regulations on the execution of electronic documents and signed ided by the Bank – in the <i>Client's Cabinet</i> , and the actions performed in it (<i>che</i> nice with the General Terms of Business. | ecking | |
| FILLED IN BY THE BANK | tive of the Dank! | | | |
| <u> </u> | itive of the Bank ¹ | | | |
| 6.1. Surname, name | | 6.2. Signature | | |
| | | Date L.S. | | |

¹ The section **shall not be filled in** if (1) the document is prepared in accordance with the laws and regulations on the execution of electronic documents and signed with a secure electronic signature or (2) the electronic document is filled in interactively in the environment provided by the Bank – in the *Client's Cabinet*, and the actions performed in it (*checking the box*) signify giving consent, and is considered an *Electronic Signature* in accordance with the General Terms of Business.