

ADDITIONAL CARD APPLICATION

FILL IN USING BLOCK CAPITALS!

1. Client information

1.1. Client _____
(Individuals — name, surname; legal entities — company name and name, surname of the principal cardholder)

[illegible]

2. Information on the additional cardholder

2.1. Name, surname _____

2.2. Personal identity number (issued in the Republic of Latvia) 2.3. Date of birth

2.4. Client's association with the additional Cardholder _____
(specify)

[illegible]

2.6. Company name as specified on the additional Card
(for legal entities) (please fill in using Latin letters)

2.7. Voice password for identification over the phone
(for receiving information about an additional Card,
for blocking an additional Card)

3. Information for connecting the Internet Bank (mobile app) for the additional Cardholder

3.1. Please connect BluOr Bank Internet Bank (including the mobile app on a smartphone) for the additional Cardholder (for confirming online purchases and viewing the Card PIN code, Card Account balance and transactions):

3.1.1. Preferred username
(username must consist of at least 6 letters and numbers, without spaces)

3.1.2. Mobile phone number:

THE BANK WILL SEND INTERNET BANK ACCESS CODES, ONLINE PURCHASE CONFIRMATIONS AND CARD TRANSACTION INFORMATION TO THIS NUMBER.

3.1.3. E-mail:

3.1.4. Allow the Cardholder the following access in the Internet Bank:

- ☐ View the additional Card Account balance and transactions, Card details (PIN code, etc.), and confirm online purchases
- ☐ View only Card details (PIN code, etc.) and confirm online purchases

4. Receipt of the Card (do not fill in if a Visa Virtual Card is selected)

- ☐ At the Bank
- ☐ By post (Latvijas Pasts, no tracking option for shipment, only in EU countries)
- ☐ By courier (worldwide; commission fee according to the Bank's Pricelist, and the Client additionally covers actual expenses)

If delivery by post or courier delivery is selected, please fill in:

- ☐ Actual address of **the Client**
- ☐ Other address

If you choose courier delivery, please provide the recipient's first and last name, as well as their phone number for the courier:

5. Confirmation and consent

By signing this application, I confirm that:

- 5.1. All the information provided is complete and true, and I acknowledge that in the event of providing false information, I will be liable in accordance with the applicable laws and regulations;
- 5.2. Prior to signing this Application, I have read the terms and conditions of the Agreement on Account Opening and Maintenance, the terms and conditions of the Credit Card Agreement, the General Terms of Business, and the Pricelist, I understand them, agree to them, recognise them as binding upon myself, and undertake to comply with them. I am aware that this Application and all the above documents approved by the Bank and amendments thereto constitute the Agreement between the Bank and the Client, hereinafter referred to as the Agreement, and are available on the Bank's website www.bluorbank.lv or at the Client Service Centre;
- 5.3. I want to use the services offered by the Bank in accordance with the terms of this Agreement;
- 5.4. The Agreement between the Bank and the Client is considered concluded at the moment the Bank opens a Card Account for the Client;
- 5.5. I have familiarized myself with the Blue KEY user manual (if such a service has been selected);
- 5.6. I have received the authentication tool selected in this Application, and I am informed that the Bank will use the information specified in paragraphs 3.1.2 and 3.1.3 of this Application for sending the Blue KEY authentication initialization password, access data to the Blue KEY activation website, and for information on Card transactions (if such a service has been selected);
- 5.7. In case of choosing to receive the Card by post or by courier delivery, I confirm that I am aware of and accept all the risks associated with sending/handing over the Card, including the risks related to the safety and delivery time of postal items and courier delivery. I am aware that the Bank shall not be liable for the loss or other expenses of the Client or third parties, which may arise due to the delay in issuing the Card, its loss, damage or misuse, including disclosure of confidential information or other circumstances beyond the control of the Bank;
- 5.8. The existence of a legitimate basis for data processing for the transfer of third-party data specified in the Application to the Bank and that they and the Client are informed that the Bank processes personal data in accordance with the Privacy Policy. Purpose of data processing: opening and servicing of the card. More detailed information on the Bank's Privacy Policy is available here: <https://bluorbank.lv/en/processing-of-personal-data>;
- 5.9. I am informed that if a Gold card with a Priority Pass package is applied for, participation in the Priority Pass program means that the Bank will transfer the Client's personal data to Priority Pass Limited for use in accordance with their personal data processing policy available on the website <https://www.prioritypass.com/privacy-notice>.

* I agree that electronic mail (e-mail) may be used for exchanging information and documents. I confirm that I am aware of the risks associated with the use of e-mail, and the Bank has informed me about the possible risks, explained consequences, and that the information is understandable to me.

6. Client, Cardholder¹

- | | |
|---|---|
| 6.1. Name, surname of the Client
(Client's representative) _____ | 6.2. Signature of the Client
(Client's representative) _____ |
| 6.3. Code calculator (Digipass) key or Blue KEY (S) _____ | |
| 6.4. Name, surname of the
additional cardholder _____ | 6.5. Signature of the
additional cardholder _____ |
| 6.6. Code calculator (Digipass) key or Blue KEY (S) _____ | Date _____ L.S. |
| | dd/mm/yyyy |

¹ Ignore this section if the document is prepared in accordance with the applicable laws and regulations regarding electronic documents and signed with a secure electronic signature.
The fields "Surname, name", "Code calculator (Digipass) key or Blue KEY (S)", and "Date" **shall be completed** if the document is signed using an authentication tool provided by the Bank.

FILLED IN BY THE BANK

7. Representative of the Bank^{*}

- | | |
|--------------------------|----------------------|
| 7.1. Surname, name _____ | 7.2. Signature _____ |
| | Date _____ L.S. |
| | dd/mm/yyyy |

^{*} The section **shall not be filled** in if the document has been prepared in accordance with the applicable laws and regulations regarding the execution of electronic documents and signed with a secure electronic signature.