

KNOW YOUR CUSTOMER QUESTIONNAIRE (INDIVIDUALS)

- New registration
 Customer data update

PV No.
 Customer No.
 (to be filled in by a bank employee)

BASIC INFORMATION ABOUT THE HOLDER

Full name			
Personal Number / Foreigner's or other Personal Number			
Gender			
Date of birth	Country of birth	Place of birth	
Number of the ID Document	Date of validity of the ID Document	Issuer of the ID Document	
Number of the second ID Document¹	Date of validity of the second ID Document	Issuer of the second ID Document	
Address as shown on the identity document/permanent residence (street number, street, floor, apt., location, post code, quarter, country)			
Residence address (street number, street, floor, apt., location, post code, quarter, country)	<input type="radio"/> Coincides with the permanent address <input type="radio"/> Other (please, specify):		
Correspondence address (street number, street, floor, apt., location, post code, quarter, country)	<input type="radio"/> Coincides with the permanent address <input type="radio"/> Other (please, specify):		
Telephone, e-mail			
Change of name in the last 12 months	<input type="radio"/> No <input type="radio"/> Yes (please, specify your previous name):		
Citizenship (Please, specify your citizenship)			In case of American citizenship, please enter your Social Security Number (SSN)
Other citizenship (Please, specify second and any other citizenship you hold)			
Current occupation			

BUSINESS RELATIONSHIP WITH THE BANK

Purpose and type of business relationship	<input type="checkbox"/> Bank accounts and cards (incl. credit cards)	<input type="checkbox"/> Cash-desk transactions
	<input type="checkbox"/> E- and mobile banking	<input type="checkbox"/> Currency exchange
	<input type="checkbox"/> Local payment	<input type="checkbox"/> Safe deposit box
	<input type="checkbox"/> International Payments	<input type="checkbox"/> Credit products
	<input type="checkbox"/> Term deposits	<input type="checkbox"/> Investment products
	<input type="checkbox"/> Other (please, specify):	
Expected annual volume of revenues on the account/s	<input type="radio"/> up to BGN 100,000 <input type="radio"/> from BGN 100,000 to BGN 350,000 <input type="radio"/> from BGN 350,000 to BGN 500,000 <input type="radio"/> above BGN 500,000	
Origin of funds	Origin of the funds which will be channeled through the account/s with the Bank: (Please, specify business, name of payer/ employer and a period of acquisition/ savings)	

DECLARATION FOR TAX PURPOSES OF THE HOLDER

For the purpose of the automatic exchange of financial information pursuant to art. 142M, para 1 of the Tax and Social Insurance Procedure Code (TSIPC)

Country (jurisdiction) where I am a resident for tax purposes	First country (jurisdiction) where I am a resident for tax purposes	Second country (jurisdiction) where I am a resident for tax purposes
	Tax identification number or its functional equivalent (incl. Social Security number), issued by the first country (jurisdiction) where I am a resident for tax purposes:	Tax identification number or its functional equivalent (incl. Social Security number), issued by the second country (jurisdiction) where I am a resident for tax purposes:

¹ A second identity document shall be provided upon request by the bank employee in compliance with the legal requirements.
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	Address of the first country (jurisdiction) where I am a resident for tax purposes (street number, street, floor, apt., location, post code, quarter, country)	Address of the second country (jurisdiction) where I am a resident for tax purposes (street number, street, floor, apt., location, post code, quarter, country)
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I am a resident for tax purposes of other countries (jurisdictions) other than the ones specified above
(If the customer fills in the field above, s/he shall fill in an additional KYC questionnaire (Individuals))

SUPPLEMENT TO THE STATEMENT FOR TAX PURPOSES
If you have specified a single country (jurisdiction) of which you are a resident for tax purposes in: Antigua and Barbuda, Bahamas, Bahrain, Barbados, Vanuatu, Grenada, Dominica, Cyprus, Malta, United Arab Emirates, Turks and Caicos Islands, Panama, Saint Kitts And Nevis, Saint Lucia or Seychelles, and your ID is issued by the same jurisdiction, please also answer the following questions:

1. I have acquired the right of residence under the regime "Citizenship by Investment/ Residence by Investment" in the country (jurisdiction) of which I am a resident for tax purposes	<input type="radio"/> No <input type="radio"/> Yes
2. I have the right of residence in another country/s (jurisdiction/s) than the one indicated in the identity document	<input type="radio"/> No <input type="radio"/> Yes (please specify the jurisdiction/ jurisdictions)
3. I have spent more than 90 days in another country/s (jurisdiction/s) in the previous year	<input type="radio"/> No <input type="radio"/> Yes (please specify the jurisdiction/ jurisdictions)
4. In the previous year, I have filed an annual personal income tax return	<input type="radio"/> I have not filed an annual personal income tax return <input type="radio"/> Yes (please specify the jurisdiction/ jurisdictions)

POLITICALLY EXPOSED PERSON DECLARATION (pursuant to art. 42, para 2, item 2 of the Measures against Money Laundering Act (MAMLA), Appendix No. 1 to art. 26, para 1 of the Rules for Implementation of the Measures against Money Laundering Act)

I.	I hereby declare that	I do not belong to the categories under Art. 36, para. 2 of MAMLA.
	I belong to the following category under art. 36, para 2 of MAMLA (specify a category)	
	Heads of State, heads of government, ministers and deputy ministers or assistant ministers members of parliament or of other legislative bodies	
	Members of supreme courts, of constitutional courts or of other high-level judicial bodies, the decisions of which are not subject to appeal, except in exceptional circumstances	
	Members of a court of auditors	
	Members of the boards of central banks	
	Ambassadors and charges d'affaires	
	High-ranking officers in the armed forces	
	members of the administrative, management or supervisory bodies of State-owned enterprises and wholly State-owned commercial corporations	
	Municipality mayors and deputy mayors, borough mayors and deputy mayors and chairpersons of a municipal council	
	Members of the governing bodies of political parties	
	Heads and deputy heads of international organizations, members of the management or supervisory bodies at international organizations or persons performing an equivalent function in any such organizations	
II.	I hereby declare that in the last 12 months:	I have not been included in the categories under Art. 36, para. 2 of MAMLA;
	I have been included in the following category under art. 36, para 2 of MAMLA (specify a category under item 1 above):	
III.	I hereby declare that	I do not belong to the categories under Art. 36, para. 5 of MAMLA.
	I belong to the following category under art. 36, para 5 of MAMLA (specify a category):	
	Spouses or de facto cohabitants	
	First-degree descendants and the spouses or the de facto cohabitants thereof (children)	
	First-degree ascendants and the spouses or the de facto cohabitants thereof (parents)	
	Second-degree correlative relatives and the spouses or the de facto cohabitants thereof (brother/sister)	
	any natural person who is known to have joint beneficial ownership with any person referred to art. 36, para 2 of MAMLA of a legal person or other legal entity or to be in other close commercial, professional or other business relationships with any person referred to in art. 36, para 2 of MAMLA	
	Any natural person who has sole ownership or sole beneficial ownership of a legal person or other legal entity which is known to have been set up for the benefit of any person referred to in art. 36, para 2 of MAMLA	
IV.	I hereby declare that in the last 12 months:	I have not been included in the categories under Art. 36, para. 5 of MAMLA;
	I have been included in the following category under art. 36, para 5 of MAMLA (specify a category under item III above)	
I hereby provide additional information with regard to my assignment to the aforesaid category/ies:		
.....		
<i>(The position of the person pursuant to art. 36, para 2 of MAMLA shall be specified with regard to item I and item II; the full name and position of the person pursuant to art. 36, para 2 of MAMLA shall be specified with regard to item III and item IV)</i>		

Filling in the fields marked with Roman numerals is mandatory

CONSENT IN ACCORDANCE WITH REGULATION (EU) 2016/679 OF THE EUROPEAN PARLIAMENT AND THE COUNCIL

In order for you to be kept up to date with new information and not to miss out on the opportunity to avail yourself of relevant proposals by UniCredit Bulbank AD and its partners we need your consent to have your personal data processed for the purposes of direct marketing. By giving your consent you declare that you wish to receive information from UniCredit Bulbank, via the contact data that you have given us (telephone number, email address, mailing address, etc.) about current promotions, products and bank services as well as information about the Bank's subsidiaries and business partners outside UniCredit Group, selected according to the analysis of your specific needs.

- I agree to receive information.
 I do not agree to receive information.

You have the right to withdraw your consent at any time. The withdrawal of consent does not affect the lawfulness of the processing that was made before the withdrawal of the consent.

GENERAL PROVISIONS

- I hereby declare that the information provided by me is correct, exhaustive and provided voluntarily.
- I shall immediately notify UniCredit Bulbank AD in writing in case of any changes and provide other data and documents, if necessary. In case of any change in my personal data or in the circumstances stated above, I will submit a declaration to UniCredit Bulbank AD within 7 days. If any changes take place in December, I shall submit a declaration by the end of the calendar year at the latest.
- I hereby confirm that I have been provided with and have read the information regarding the personal data processed by UniCredit Bulbank AD in accordance with Regulation (EU) 2016/679 of the European Parliament and of the Council and that I have been notified that the information regarding the personal data processed by the Bank is available on the website of the Bank, on information boards and on request at the branches of the bank.
- I declare that I am aware of and explicitly agree that the information under Art. 142b, par. 1 of TSIPC, containing my personal data, account balance or value, incl. the cash value on the account, can be the subject of an automatic exchange of financial information in accordance with Chapter 16, Section IIIa of TSIPC as well as can be provided to the jurisdiction/s where I am a resident for tax purposes, in fulfillment of the international commitments of the Republic of Bulgaria.
- I declare that the transactions/operations on the accounts within the scope of my relationship with UniCredit Bulbank AD are carried out:
 - At my expense
 - At the expense of a third person as follows: (Name, Personal Number/Foreigner's Personal Number)

I confirm that I am aware of the obligation of UniCredit Bulbank AD (the Bank) to observe the laws and regulations for imposing economic and financial sanctions or trade embargo or any other restrictive financial and economic measures. I hereby declare that I will not use the services provided by the Bank for purposes which constitute and/or may result in violation of sanctions by the Bank.

- I am aware of and I agree that the Bank does not handle any tax issues and does not provide tax consultations.
- I am aware of the criminal liability under Art. 313 of the Criminal Code for declaring false information as well as the administrative and criminal responsibility under the TSIPC.

(TSIPC – art. 278C, para. 4 “An account holder who provides false data and circumstances in a declaration or return provided for in this Code so that his/her status of a reportable person is not established, shall be liable to a fine or a pecuniary penalty of up to BGN 1,000 unless subject to a severer sanction.”)

The fields with the customer's tax identification number must be filled in or it must be indicated if the country where the customer is a resident for tax purposes does not issue a tax identification number.

INFORMATION ABOUT THE PROXY/DEPOSITOR (the field must be filled in only if not filled in personally by the holder but by a proxy/ depositor)

Name		
Capacity as	<input type="radio"/> Proxy <input type="radio"/> Depositor	
Personal Number / Foreigner's or other Personal Number		
Gender		
Date of birth	Country of birth	Place of birth
Address as shown on the identity document/ permanent residence (street number, street, floor, apt., location, post code, quarter, country)		
Correspondence address (street number, street, floor, apt., location, post code, quarter, country)	<input type="radio"/> Coincides with the permanent address <input type="radio"/> Other (please, specify):	
Telephone, e-mail		
Citizenship (Please, specify your citizenship)	Other citizenship (Please, specify second and any other citizenship)	

I declare that I am aware of and have the necessary information in connection with the circumstances being declared, and I confirm that it is accurate and correct.

Declarant's full name and signature

Name, position and signature of the employee who received the declaration

Date and hour of receiving: