APPENDIX 4

to the Terms and Conditions of Bank Services of NSD

**Document Forms to Be Filled in by Clients**

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# Declaration of Accession

# to the Bank Account Agreement

\_\_ \_\_\_\_\_\_\_\_\_\_ 20\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*Client's full name and Principal State Registration Number (OGRN) / registration number*)

represented by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acting on the basis of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby, in accordance with Article 428 of the Russian Civil Code, accedes, on a full and unconditional basis, to the Bank Account Agreement the terms and conditions of which are set out in the Terms and Conditions of NSD’s Bank Services and NSD's Fee Schedule related thereto.

The Client acknowledges that the Client is aware of the terms and conditions under which services will be provided and accepts that the Terms and Conditions of NSD’s Bank Services and NSD's Fee Schedule may be amended by NSD unilaterally, at its discretion.

The Client agrees and acknowledges that any and all disputes, dissents, or claims arising out of the Agreement or directly or indirectly relating to the Agreement, including those relating to its execution, existence, amendment, performance, violation, termination, or validity, which are not resolved by the Parties, shall be resolved in arbitration administered by the Arbitration Center at the Russian Union of Industrialists and Entrepreneurs in accordance with its rules in effect on the date of the filing of the statement of claim. Any award issued by the arbitral tribunal will be final and binding on the Parties and may not be disputed.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_, No. \_\_\_\_\_\_

*(to be completed by NSD)*

# ACCOUNT APPLICATION

# for a trading bank account with NSD

1. Applicant's full and/or short name (as per the Applicant's Articles of Association) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Applicant's full and short name in a foreign language **1**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Applicant's address in a foreign language **2** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*( resident/non-resident)* *(credit/non-credit)*

Taxpayer Identification Number (INN)/Foreign Company Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(for credit institutions)*

Tel.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SWIFT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Ownership

Non-public ownership Public (federal) ownership

Public (other than federal) ownership

5. Type of activities **3**

Financial Commercial Non-commercial

|  |
| --- |
| There have been no changes in the details previously provided to NSD.  Details previously provided to NSD have been changed. New Details Form AA001 and supporting documents are submitted. |

**Please open the following trading bank account(s) for the purpose of trade settlement upon clearing:\***

**Securities Market Sector – Clearing House: CCP NCC**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Purpose of the Account** | **Quantity of the Accounts Applied for** | | | | |
|  | **RUB** | **USD** | **Euro** | **RMB** | **GBP** |
| An account intended for the purpose of settling and/or securing liabilities eligible for clearing (this account type may be opened for Russian residents only) |  |  |  |  |  |
| An account intended for the purpose of settling and/or securing liabilities eligible for clearing - Special Brokerage Account (this account type may be opened for Russian resident non-credit institutions only) |  |  |  |  |  |
| An account intended for the purpose of settling and/or securing liabilities eligible for clearing - Clearing Participant’s Special Trading Account (this account type may be opened for Russian resident credit institutions only) |  |  |  |  |  |
| An account intended for the purpose of settling and/or securing liabilities eligible for clearing - Trust Account (this account type may be opened for Russian residents only)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *trust assets (to be completed if trust asset(s) need(s) to be specified as part of the account name)* |  |  |  |  |  |

**NSD Clearing Sector – Clearing House: NSD**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Purpose of the Account** | **Quantity of the Accounts Applied for** | | | | | | |
|  | **RUB** | **USD** | **Euro** | **RMB** | **GBP** | **CHF** | **Hong Kong Dollar** |
| An account intended for the purpose of settling liabilities eligible for clearing |  |  |  |  |  |  |  |
| An account intended for the purpose of settling liabilities eligible for clearing - Special Brokerage Account (this account type may be opened for Russian resident non-credit institutions only) |  |  |  |  |  |  |  |
| An account intended for the purpose of settling liabilities eligible for clearing - Clearing Participant’s Special Trading Account (this account type may be opened for Russian resident credit institutions only) |  |  |  |  |  |  |  |
| An account intended for the purpose of settling liabilities eligible for clearing - Trust Account (this account type may be opened for Russian residents only)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(to be completed if trust asset(s) need(s) to be specified as part of the account name)* |  |  |  |  |  |  |  |

**Sector "NSD's Clearing in the Commodity Market" – Clearing House: NSD**

|  |  |
| --- | --- |
| **Purpose of the Account** | **Quantity of the Accounts Applied for in Russian rubles** |
| An account intended for the purpose of settling and/or securing liabilities eligible for clearing |  |

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*\* Trading bank accounts are opened in accordance with and subject to the Terms and Conditions of Bank Account Services of NSD (Appendix 1 to the Bank Account Agreement)*

The documents required to open a bank account with NSD are submitted together with this Application.

Please send statements for the account(s) as follows**5**:

via the SWIFT system**6** by e-mail:**7** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send notification of account(s) opening as follows **8**:

via the SWIFT system **5** in hard copy

If the Client and NSD maintain electronic data interchange, statements will be prepared on-line upon the Client's requests.

We hereby represent that, as of the date of this Application, no credit institution has decided to suspend transactions in any account held by us with such credit institution.

We hereby represent that we do not intend to transfer funds to accounts held by any non-residents who are neither residents of the Republic of Belarus, nor residents of the Republic of Kazakhstan, and who act either for their own benefit or on behalf of third parties (hereinafter referred to as "non-resident counterparties"), under foreign trade contracts with any such non-resident counterparties, under which goods earlier purchased from residents of the Republic of Belarus or the Republic of Kazakhstan are imported to the Russian Federation from the Republic of Belarus or the Republic of Kazakhstan, respectively, and where residents submit to authorized banks, as supporting documents, shipping documents issued by consignors of the Republic of Belarus or the Republic of Kazakhstan.**7**

CEO (Client's authorized representative):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(job title) (signature) (initials and last name)

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1**  To be completed as per the Articles of Association if a foreign currency account is applied for. Where the Articles of Association do not contain the Client's name in a foreign language, the Client shall, at its own discretion, transliterate its name using the Latin alphabet.

**2** To be completed using the Latin alphabet if a foreign currency account is applied for.

**3** This field is to be completed by Russian residents only. Financial organizations include credit institutions, insurance companies, professional securities market participants, non-governmental pension funds, and investment funds', unit investment funds', or non-governmental pension funds' managers.

**4** The fields are optional.

**5** To be completed if the SWIFT system is used.

**6** Statements (including those for already existing bank accounts) will be sent to the e-mail address specified. The Client acknowledges and agrees that such information will be sent unencrypted, and thus can be read by third parties.

**7** This applies toRussian resident clients.

**8** The fields are optional. If the field is not filled in, the notification of account(s) opening is sent to the Client in hard copy.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_, No. \_\_\_\_\_\_

*( to be completed by NSD)*

# ACCOUNT APPLICATION

# for an account with NSD

1. Applicant's full and/or short name (as per the Applicant's Articles of Association): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Applicant's full and short name in a foreign language**1**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Applicant's address in a foreign language **2** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

/ Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(resident/non-resident)* (*credit/non-credit)*

Taxpayer Identification Number (INN)/Foreign Company Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(for credit institutions)*

Tel.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SWIFT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Ownership

Non-public ownership Public (federal) ownership Public (other than federal) ownership

5. Type of activities **3**

Financial Commercial Non-commercial

|  |
| --- |
| There have been no changes in the details previously provided to NSD.  Details previously provided to NSD have been changed. New Details Form AA001 and supporting documents are submitted. |

**Please open a bank account(s) for us:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Purpose of the Account** | **Quantity of the Accounts Applied for** | | | | | | | | | |
| **RUB** | **Foreign Currencies** | | | | | | | | |
|  | **USD** | **Euro** | **CHF** | **GBP** | **RMB** | **Hong Kong Dollar** | **KZT** | **BYN** | **CAD** |
| Settlement account  *(this account type may be opened for non-credit institutions only)* |  |  |  |  |  |  |  |  |  |  |
| Settlement account (special depository account) */ this account type may be opened for Russian resident non-credit institutions only)* |  |  |  |  |  |  |  |  |  |  |
| Correspondent account  (*this account type may be opened for credit institutions only)* |  |  |  |  |  |  |  |  |  |  |
| Special brokerage account  *(this account type may be opened for Russian resident non-credit institutions only)* |  |  |  |  |  |  |  |  |  |  |
| Trust account  *(this account type may be opened for Russian residents only)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *trust asset(s)*  *(to be completed if trust asset(s) need(s) to be specified as part of the account name)* |  |  |  |  |  |  |  |  |  |  |
| Bondholders’ agent’s designated account  *(this account type may be opened for Russian residents only who are on the list of persons acting as agents of bondholders)* |  |  |  |  |  |  |  |  |  |  |
| Nominee account  *(this account type may be opened for non-credit institutions only)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *the name of the account’s beneficiary should be specified* |  |  |  |  |  |  |  |  |  |  |

The documents required to open a bank account with NSD are submitted together with this Application.

Please send statements for the account(s) as follows**5**:

via the SWIFT system**6** by e-mail:**7** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the Client and NSD maintain electronic data interchange, statements will be prepared on-line upon the Client's requests.

Please send notification of account(s) opening as follows **9**:

via the SWIFT system**6** in hard copy

We hereby represent that, as of the date of this Application, no credit institution has decided to suspend transactions in any account held by us with such credit institution.

We hereby represent that we do not intend to transfer funds to accounts held by any non-residents who are neither residents of the Republic of Belarus, nor residents of the Republic of Kazakhstan, and who act either for their own benefit or on behalf of third parties (hereinafter referred to as "non-resident counterparties"), under foreign trade contracts with any such non-resident counterparties, under which goods earlier purchased from residents of the Republic of Belarus or the Republic of Kazakhstan are imported to the Russian Federation from the Republic of Belarus or the Republic of Kazakhstan, respectively, and where residents submit to authorized banks, as supporting documents, shipping documents issued by consignors of the Republic of Belarus or the Republic of Kazakhstan.**8**

CEO (Client's authorized representative):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(job title) (signature) (initials and last name)

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1**  To be completed as per the Articles of Association if a foreign currency account is applied for. Where the Articles of Association do not contain the Client's name in a foreign language, the Client shall, at its own discretion, transliterate its name using the Latin alphabet.

**2** To be completed using the Latin alphabet if a foreign currency account is applied for.

**3** This field is to be completed by Russian residents only. Financial organizations include credit institutions, insurance companies, professional securities market participants, non-governmental pension funds, and investment funds', unit investment funds', or non-governmental pension funds' managers.

**4** The said list is maintained by the Bank of Russia and available on the Bank of Russia's official web site.

**5** The fields are optional.

**6** To be completed if the SWIFT system is used.

**7** / Statements (including those for already existing bank accounts) will be sent to the e-mail address specified. The Client acknowledges and agrees that such information will be sent unencrypted, and thus can be read by third parties.

**8** This applies toRussian resident clients.

**9** The fields are optional. If the field is not filled in, the notification of account(s) opening is sent to the Client in hard copy.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_, No. \_\_\_\_\_\_

*(to be completed by NSD)*

# 

# 

# Account application to Open a Special Account with NSD

# for the Purposes of Settlements through an Individual Account Held with а Foreign Organization

1. Applicant's full and/or short name (as per the Applicant's Articles of Association): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Applicant's full and short name in a foreign language**1**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Адрес места нахождения на иностранном языке / Applicant's address in a foreign language**2** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( *resident/non-resident*) *(credit/non-credit*)

Taxpayer Identification Number (INN)/Foreign Company Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ BIC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(for credit institutions)*

Tel.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SWIFT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Ownership

Non-public ownership Public (federal) ownership Public (other than federal) ownership

5. Type of activities **3**

Financial Commercial Non-commercial

|  |
| --- |
| There have been no changes in the details previously provided to NSD.  Details previously provided to NSD have been changed. New Details Form AA001 and supporting documents are submitted. |
|  |

**Please open the following bank account(s) for the purposes of settlements through individual accounts:**

**Euroclear Bank SA/NV, Brussels**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Purpose of the Account** | **Quantity of the Accounts Applied for** | | | | | | |
|  | **Foreign Currencies** | | | | | | |
|  | **USD** | **Euro** | **CHF** | **CHF** | **RMB** | **Hong Kong Dollar** | **CAD** |
| Settlement account  *(this account type may be opened for non-credit institutions only)* |  |  |  |  |  |  |  |
| Special depository account  *(this account type may be opened for Russian resident non-credit institutions only)* |  |  |  |  |  |  |  |
| Correspondent account  (*this account type may be opened for credit institutions only)* |  |  |  |  |  |  |  |
| Special brokerage account  *(this account type may be opened for Russian resident non-credit institutions only)* |  |  |  |  |  |  |  |
| Trust account  *(this account type may be opened for Russian residents only)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *объект доверительного управления / trust asset(s)*  *(to be completed if trust asset(s) need(s) to be specified as part of the account name)* |  |  |  |  |  |  |  |

The documents required to open a bank account with NSD are submitted together with this Application.

Please send statements for the account(s) as follows**5**:

via the SWIFT system**6** by e-mail:**7** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the Client and NSD maintain electronic data interchange, statements will be prepared on-line upon the Client's requests.

We hereby represent that, as of the date of this Application, no credit institution has decided to suspend transactions in any account held by us with such credit institution.

We hereby represent that we do not intend to transfer funds to accounts held by any non-residents who are neither residents of the Republic of Belarus, nor residents of the Republic of Kazakhstan, and who act either for their own benefit or on behalf of third parties (hereinafter referred to as "non-resident counterparties"), under foreign trade contracts with any such non-resident counterparties, under which goods earlier purchased from residents of the Republic of Belarus or the Republic of Kazakhstan are imported to the Russian Federation from the Republic of Belarus or the Republic of Kazakhstan, respectively, and where residents submit to authorized banks, as supporting documents, shipping documents issued by consignors of the Republic of Belarus or the Republic of Kazakhstan.**8**

CEO (Client's authorized representative):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(job title) (signature) (initials and last name)

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1**  To be completed as per the Articles of Association if a foreign currency account is applied for. Where the Articles of Association do not contain the Client's name in a foreign language, the Client shall, at its own discretion, transliterate its name using the Latin alphabet.

**2** To be completed using the Latin alphabet if a foreign currency account is applied for.

**3** This field is to be completed by Russian residents only. Financial organizations include credit institutions, insurance companies, professional securities market participants, non-governmental pension funds, and investment funds', unit investment funds', or non-governmental pension funds' managers.

**4** Optional fields.

**5** To be completed if the SWIFT system is used.

**6** Statements (including those for already existing bank accounts) will be sent to the e-mail address specified. The Client acknowledges and agrees that such information will be sent unencrypted, and thus can be read by third parties.

**7** This applies toRussian resident clients.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_, No. \_\_\_\_\_\_

*(to be completed by NSD)*

# 

# Bank Account Registration Application

1. Applicant's full and/or short name (as per the Applicant's Articles of Association): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(resident / non-resident) (credit / non-credit )

Taxpayer Identification Number (INN)/Foreign Company Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(для кредитных организаций/for credit institutions)

Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SWIFT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please register bank account1 No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ opened with NSD, as an account for the following transactions:**

Trade settlements (via a Foreign Organization)

Securities transfer with cash settlement control

 Settlements on a PVP basis

**We hereby acknowledge and confirm that we have read, accept and agree to be bound by the Terms and Conditions of Bank Services.**

Руководитель / CEO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

(подпись / signature) (И.О. Фамилия / initials and last name)

Stamp Here

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1 - A trading bank account may not be registered as an account for transactions.

# CASH TRANSFER ORDER No. \_\_\_\_

**Dated / от \_\_\_\_\_\_\_\_\_\_\_\_\_**

*(date)*

|  |  |  |
| --- | --- | --- |
| Receiver: | | NSD |
| Sender: | |  |
| Number of the account to be debited: | |  |
| Sender's responsible officer's full name and telephone number: | |  |
|  | | |
| 20 | TRANSACTION REFERENCE NUMBER, DATE(to be completed by NSD) |  |
| 32A | VALUE DATE |  |
|  | CURRENCY CODE |  |
|  | AMOUNT AND CURRENCY |  |
| 50 | ORDERING CUSTOMER |  |
| 52 | ORDERING INSTITUTION |  |
| 56 | INTERMEDIARY |  |
| 57 | ACCOUNT WITH INSTITUTION |  |
| 59 | TO BENEFICIARY`S ACCOUNT |  |
|  | BENEFICIARY CUSTOMER |  |
| 70 | DETAILS OF PAYMENT |  |
| 71A | DETAILS OF CHARGES |  |
| 72 | SENDER TO RECEIVER INFORMATION |  |
|  | Additional details for NSD \* |  |

OFFICIAL SIGNATURES

\* In a Foreign Exchange Transfer Instruction, in which the amount to be transferred or the account to be debited is in Russian rubles, in the 'Additional Details' field, it is required to specify the Client's bank account with NSD to which the amount resulting from the conversion has to be credited.

To NSD

# Foreign Exchange Instruction

**№ ­­\_\_ от «\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_20 \_\_г.**

|  |  |  |  |
| --- | --- | --- | --- |
| Client's name: |  | | |
| INN (Taxpayer Identification Number) |  | | |
| |  | | --- | | Full name of an employee authorized to make decisions regarding the transaction: | |  | Telephone:  Fax: |  |

Please execute this Foreign Exchange Instruction at NSD's exchange rate:

|  |  |  |  |
| --- | --- | --- | --- |
| Buy Currency | Buy Currency amount (both in figures and words)\* | Sell Currency | Sell Currency amount (both in figures and words)\* |
| 1 | 2 | 3 | 4 |
|  |  |  |  |

\* It is not allowed to complete columns 2 and 4 at the same time.

We hereby authorize NSD to debit our account No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ held with NSD with the following amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

amount in figures and words)

|  |
| --- |
|  |

Please credit the amount purchased to the account held with NSD № \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

|  |
| --- |
|  |

Please transfer the amount purchased to the account № \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ в \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

BIC/SWIFT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, correspondent account No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Client's authorized representatives:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(job title) (signature) (initials and last name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(job title) (signature) (initials and last name)

Stamp Here

*Below fields are to be completed by NSD:*

Clients Relations Department's authorized officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(signature) (full name)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. | Date when the Instruction is received: |  | | |
| 2. | Transaction date: |  | Transaction number: |  |
| 3 | Settlement date: |  | | |
| 4. | Exchange rate: |  | | |
| 5. | Amount debited from the Client's account: |  | Currency: |  |
| 6. | Amount credited to the client's account: |  | Currency: |  |

Cash Settlement Department's authorized officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(/ signature)*  *(full name)*

*Date: \_\_\_\_\_\_\_\_\_\_\_ 20\_\_, No. \_\_\_\_\_\_*

*(to be completed by NSD)*

# Application [[1]](#footnote-1)

# for the Issuance of Statements of Bank Services

1. Applicant's full and/or short name (в соответствии с Уставом/ as per the Applicant's Articles of Association) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Taxpayer Identification Number (INN) / Foreign Company Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**We hereby request that statements of bank services be issued to us in accordance with the following terms and conditions [[2]](#footnote-2)**:

Issue separate statements of bank services for each of the trust accounts

**Charge the fee payable for bank services [[3]](#footnote-3)** (tick the required option(s)):

Separately for each trust account

For all trust accounts, from account No.:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

For other bank accounts, from account No:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

CEO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

(*signature*) (*initials and last name*)

Stamp

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_

Date: \_\_ \_\_\_\_\_\_\_\_\_\_ 20\_\_, No. \_\_\_\_\_\_

(to be completed by NSD)

# 

# Notice of Revocation of a Recurring Cash Transfer Instruction

Client's full or short name (as per the Client's Articles of Association): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Taxpayer Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We hereby revoke Recurring Cash Transfer Instruction No. \_\_\_ dated \_\_ \_\_\_\_\_\_\_\_\_ 20\_\_ applicable to Account No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with effect from \_\_ \_\_\_\_\_\_\_\_\_\_\_ 20\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

(signature) (initials and last name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ 1

(signature) (initials and last name)

Stamp here \_\_\_ \_\_\_\_\_\_\_20\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The signatures of the Client's Authorized Representatives (as applicable) and the seal, as shown in the signature and seal card accepted by NSD.

# 

# Account Closing Application

Applicant's full and/or short name (as per the Applicant's Articles of Association) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**With effect from \_\_\_\_\_\_\_\_\_ 20\_\_, we terminate** Bank Account Agreement No. \_\_\_\_\_ dated \_\_\_\_\_\_\_\_ 20\_\_.[[4]](#footnote-4)1

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Please close the following account(s) held with NSD::**

**Instructions with respect to the account balances**:

Please remit the balance (less the applicable fee in accordance with NSD's Fee Schedule) to the following account:

In Russian rubles:

Beneficiary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Taxpayer Identification Number (INN): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Bank's BIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Bank's Correspondent Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In a foreign currency:

Beneficiary's name in the foreign language or SWIFT BIC (if available): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Taxpayer Identification Number (INN)/Foreign Company Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Bank's SWIFT BIC or (if SWIFT BIC is unavailable) name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If necessary:

Correspondent Bank's SWIFT BIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beneficiary's Bank's Correspondent Account with the Correspondent Bank:

**Cheque book:**

We did not receive a cheque book.

We are surrendering the cheque book with unused cheques numbered \_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_.

Please send notification of account(s) closing as follows 2:

via the SWIFT system 3 in hard copy

**Contact person:**

**Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tel.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CEO (Client's authorized representative):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Job title) (signature) (initials and last name)

Stamp Here

«\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_г.

# POWER OF ATTORNEY No.

The City of \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(specify the date in words)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(organization's full name as per the organization's Articles of Association)

represented by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(job title and full name)

acting under the Articles of Association/power of attorney, hereby authorizes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(full name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(type and details of the ID document (name, series, number, and date and place of issue))

to submit and receive any documents in connection with the opening, maintaining, and closing a bank account(s) with NSD, and to sign in acknowledgment of the receipt of any such documents.

I hereby certify the following signature of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(attorney's last name and initials) (attorney's signature)

удостоверяю.

This Power of Attorney is valid until \_\_\_\_\_\_\_\_\_\_\_\_.

CEO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( initials and last name)

(подпись/signature)

Stamp Here

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* The power of attorney is to be issued using the organization's letterhead.
* The power of attorney is to be replaced immediately upon replacement of the attorney.
* It is recommended that an updated power of attorney be submitted to NSD at least 10 days before the expiry of the initial power of attorney.

*[to be completed using the organization's letterhead]*

# Account Balance Confirmation

|  |
| --- |
|  |
|  |
| *(Client's full name as per the Articles of Association/Charter)* |

as of **1 January 20\_\_**

Having verified the account statements provided by you against our records, we hereby confirm that the account statements are accurate, and that the account balances specified therein match the balances of our accounts with NSD as per our records:

|  |  |  |  |
| --- | --- | --- | --- |
| **#** | **Account number\*** | **Amount (in figures)** | **Amount (in words)** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **…** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| CEO |  |  |  |
|  | *(Signature)* |  | *(Full name)* |
|  |  |  |  |
| Chief Accountant |  |  |  |
|  | *(Signature)* |  | *(Full name)* |

Seal

\* Specify the bank accounts in RUB and foreign currencies, as held with NSD, including accounts with zero balances.

«\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_, №\_\_\_\_\_\_\_\_

(to be completed by NSD)

# Notification

# of an Electronic Payment and/or Attempted Electronic Payment

# Made without the Client's Consent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client's full and/or short name (as per the Client's Articles of Association)

Taxpayer Identification Number (INN) / Foreign Company Code (KIO)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(contact telephone number)

We hereby notify you that the fact of electronic payment made without our consent has been identified, and instruct you to suspend execution of the following Instructions:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| # | Date | Payment amount | Payment currency | Payer's account number | BIC code of payee's bank | Payee's account number |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

In view of the above, we hereby request:

* to suspend our use of the Bank-Client Systems
* not to suspend our use of the Bank-Client Systems

CEO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

( signature) (initials and last name)

Seal

«\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_

«\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_ №\_\_\_\_\_

(to be completed by NSD)

# Application for Account Registration in the Faster Payments System (SBP)

Client's full and/or short name (as per the Client's Articles of Association):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Merchant's name for registration in the Faster Payments System (max. 35 characters):

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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Taxpayer Identification Number (INN) / Foreign Organization Code (KIO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please register the following bank accounts in Russian rubles held with NSD as accounts intended for making transactions via the Faster Payments System:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Please send an account registration confirmation, as well as information regarding the identifiers assigned to the Client and Merchant, by e-mail to the following e-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact persons:

Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

е-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We hereby acknowledge and confirm that we have read, accept and agree to be bound by the Terms and Conditions of Bank Services.

CEO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

(signature) ( initials and last name)

Seal

«\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_

«\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_ №\_\_\_\_\_

(to be completed by NSD)

# Application

# for Bank Account Deregistration in the Faster Payments System (SBP)

1. Applicant's full and/or short name (as per the Applicant's Articles of Association): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Taxpayer Identification Number (INN) / Foreign Organization Code (KIO):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please deregister the following bank accounts in the Faster Payments System:

all bank accounts held with NSD and registered for the purposes of making transactions via the Faster Payments System

**** the following bank accounts held with NSD:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Please send an account deregistration confirmation by e-mail to the following e-mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CEO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

(signature) (initials and last name)

Seal

«\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_

1. This Application will be valid until revoked by the Client or until a new Application is submitted by the Client. [↑](#footnote-ref-1)
2. The terms and conditions set out herein shall also apply to newly opened bank accounts. The terms and conditions set out herein will be followed starting with a statement of bank account services to be issued for the calendar month in which this Application was submitted. [↑](#footnote-ref-2)
3. Where there are no funds available in the account indicated or the funds available in the account are insufficient, NSD may, at its own discretion and without Client's further instructions, choose any account from which the fee payable for bank account services and a penalty (if any) are to be debited. [↑](#footnote-ref-3)
4. 1 The Bank Account Agreement must be terminated if the Client closes all accounts opened under the Agreement.

   2 The fields are optional. If the field is not filled in, the notification of account(s) closing is sent to the Client in hard copy.

   3The use of the SWIFT system is impossible in case of Bank Account Agreement termination. [↑](#footnote-ref-4)