

**CUSTOMER PROFILE**

In the context of the Bank/ client relationship which we have or will have with Alpha Bank Cyprus Ltd (the “**Bank**”) and in relation to the account or the accounts we keep or will keep with the Bank from time to time:

1. We set out the following facts and information which relate to our person:

| A. ORGANIZATION DETAILS | |
|------------------------------------|--|
| Name | |
| Trading Name (where applicable) | |
| Type of Legal Entity | <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Public Company - Not Listed <input type="checkbox"/> Public Company - Listed Listing Status: «ListingStatus» <input type="checkbox"/> Credit Institutions or Financial Institutions <input type="checkbox"/> Administration Committee <input type="checkbox"/> Association <input type="checkbox"/> Charity Organization <input type="checkbox"/> Church, Monasteries <input type="checkbox"/> City Council / Local Authorities <input type="checkbox"/> Club <input type="checkbox"/> Company providing Financial and Investment Services <input type="checkbox"/> Embassies, Diplomatic Missions <input type="checkbox"/> Foundation <input type="checkbox"/> Gambling and Gaming Company <input type="checkbox"/> Governmental Organization (Semi Governmental Organization) <input type="checkbox"/> Investment Funds <input type="checkbox"/> Joint Venture <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Municipality <input type="checkbox"/> Pension Fund <input type="checkbox"/> Provident Fund <input type="checkbox"/> S.A. (Societe Anonyme) <input type="checkbox"/> Parents Association <input type="checkbox"/> Trust <input type="checkbox"/> Unlimited Liability Partnership <input type="checkbox"/> Union <input type="checkbox"/> Other (give details) |

| B. IDENTIFICATION | | | | | | | | | | | |
|--|---|---------------------------------|--|-----------------------|---------|----------------------------------|--|--|--|--|--|
| Reg. No | | Reg. Date | | | | | | | | | |
| Country of Incorporation | | Expiry Date (where applicable) | | | | | | | | | |
| Legal person's representation expiry date (where applicable) | | VAT Reg. No. (where applicable) | | | | | | | | | |
| Tax Id No. and Country of Tax Residency <i>(in case the Legal person is tax resident in more than one country all countries must be stated. If the country declared is America then Tax Id No is required)</i> | <table border="1"> <thead> <tr> <th>Tax Id No.</th> <th>Country</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table> | | | Tax Id No. | Country | | | | | | |
| Tax Id No. | Country | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Operating License from Supervisory body – Where Applicable <i>(a copy of the operations license / registration must be submitted)</i> | <table border="1"> <tbody> <tr> <td>Supervisory body Name</td> <td></td> </tr> <tr> <td>Register Number / License Number</td> <td></td> </tr> <tr> <td>Date of 1st issue of license / registration number</td> <td></td> </tr> <tr> <td>Date of issue of current license / Registration Number</td> <td></td> </tr> </tbody> </table> | | | Supervisory body Name | | Register Number / License Number | | Date of 1st issue of license / registration number | | Date of issue of current license / Registration Number | |
| Supervisory body Name | | | | | | | | | | | |
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| Date of issue of current license / Registration Number | | | | | | | | | | | |

| C. COMMUNICATION DETAILS | | | |
|--|--|-------------------------------|--|
| Registered Address | | | |
| Head Offices Address | | | |
| Correspondence Address | | | |
| Phones | | | |
| Fax | | | |
| Contact Person(s) <i>(name and position)</i> | | CIF Number (for Internal use) | |
| Email | | | |
| Website Address | | | |
| Correspondence Language | | | |

D. INFORMATION RELATED TO POLITICALLY EXPOSED PERSONS

Politically exposed persons definition: Natural persons who have or had been entrusted with prominent public functions in the Republic or in a foreign country, as well as immediate family members, or persons known to be close associates, of such persons

Is any Politically exposed person related with the legal person?

☐ Yes ☐ No

If the answer to the above question is "YES" then complete the table in the right hand column

| | | |
|-----------------------|---|--|
| Name and Surname | | |
| Type of Certification | | |
| ID / Passport Number | | |
| Position | Period during which the position was held | Relationship with the Company / Organization |
| | | |

E. FINANCIAL INFORMATION

Legal person's activities

*(A **detailed** analysis must be provided for the legal person's general activities e.g. what products / services the legal person provides, from where the legal person buys / and sells its products and services and in which countries it operates, as well as for the legal person's activities that will be conducted through the accounts maintained with Alpha Bank Cyprus, if they are limited in relation to the general activities)*

Does the legal person belong to a group? i.e. Has the Ultimate Beneficial Owner shareholding interest in other legal persons?

☐ Yes ☐ No

(if the answer is yes, provide a structure with details of the percentages held in each company/ legal person, the names, registration numbers and country of incorporation of each company/legal person, and the nature of activities)

Group Name :

Group Activities

(Provide a detailed description of group activities. Provide web sites(if exist))

Related legal entities names

(Bank's legal customers (legal persons) transacting with each other without any shareholding relationship. Provide details for their commercial relationship)

| | | | |
|---|---------------------------|------------------------|------------------------|
| Legal person Financial Information <i>(Financial information is required, whenever this is considered necessary for better understanding the activities of the Legal person as well as the source and use of assets and wealth. In case that there aren't any financial statements then other documents which show the legal person's turnover may be submitted, i.e. a tax return)</i> | INFORMATION | CURRENT YEAR -1 | CURRENT YEAR -2 |
| | Annual Turnover (in Euro) | | |
| | Profit after Tax | | |
| | Dividends to shareholders | | |
| | Total Assets | | |
| | Total Liabilities | | |
| | Total equity | | |
| Legal person's number of Staff <i>(in case of activities in Cyprus and in any other case group staff)</i> | | | |
| Other Banks you co-operate with <i>(Names, countries)</i> | | | |

| F. SHAREHOLDING INFORMATION (Applies only for Companies) | |
|--|--|
| The registered shareholders are also the beneficial owners? <i>(if the answer is No then the declaration of nominee shareholders should be completed and a diagrammatical chart must be provided showing the shareholding structure of the Legal Person up to the level of the Ultimate Beneficial Owner.)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is it allowed by Country of Registration to issue bearer shares? <i>(Applies only for International Companies)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Does the company have bearer shares? <i>(Applies only for International Companies)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| G. OTHER INFORMATION | | | | | | | |
|--|---|-----|--|------|--|----------------------------|--|
| Are you in any way associated with any of the Bank's staff? | <input type="checkbox"/> Yes <input type="checkbox"/> No Name: Relationship: | | | | | | |
| Have you been introduced to the Bank by any member of the staff or Bank's customer? | <input type="checkbox"/> Yes <input type="checkbox"/> No Name: | | | | | | |
| Introducers details <i>(to be completed for International customers where applicable)</i> | <table border="1"> <tr> <td>CIF</td> <td></td> </tr> <tr> <td>Name</td> <td></td> </tr> <tr> <td>Id / Passport/ Reg. Number</td> <td></td> </tr> </table> | CIF | | Name | | Id / Passport/ Reg. Number | |
| CIF | | | | | | | |
| Name | | | | | | | |
| Id / Passport/ Reg. Number | | | | | | | |

2. We attach the legal documents relating to our person according to the Bank's requirements as well as documents relating to our activities.

3. We confirm that we have received a copy of the General Terms and Conditions of the Bank and we agree that my relationship with the Bank and our agreement with it in connection with any account opened or to be opened in our name (either on our own or jointly with any other person or persons) will be governed by the said General Terms and Conditions (as amended and/or supplemented from time to time and published on the website of the Bank on the Internet) and the terms of any other specific agreement which may be made between the Bank and us.

4. We agree that, regarding the carrying out of any orders or transactions, the provision of any facilities or other services and, in general, the operation of any account, the Bank shall charge the respective expenses and charges (which are set out in the Charges Catalogue of the Bank in force from time to time and published on the website of the Bank on the Internet) and we authorize the Bank to charge these amounts in any account held in our name (either on our own or jointly with any other person or persons) .

5. We agree to receive informative, advertising or other material in relation to any products or services of the Bank or of third parties and businesses who cooperate with the Bank.

6. We confirm that all facts and information set out herein above are correct, true and accurate and we undertake immediately to notify the Bank in case there is any change to these facts and information.

7. Consent for receiving a Bank Reference Letter (where applicable)

☐ We authorize you to request directly a reference letter relating to our person. The details of the Financial Organization are:

Financial Organizations Name:

Address

Officers Details:

Name:

Telephone:

Email.:

Fax:

Authorized Persons

[illegible]

Date _____

| | |
|-------------------------|--------------------|
| FOR INTERNAL USE | |
| CIF No. | «CIF» |
| Input by | Checked by |
| Name and Signature | Name and Signature |