

## APPLICATION FOR OPENING A PAYMENT CARD ACCOUNT, ISSUING AND MAINTAINING A PAYMENT CARD FOR AN INTERNATIONAL INDIVIDUAL

FILL IN USING BLOCK CAPITALS!

### 1. Client information

1.1. Surname, name \_\_\_\_\_ 1.2. Date of birth \_\_\_\_\_

1.3. Current Account No. (IBAN) with AS BlueOrange Bank (hereinafter referred to as the Bank): L V \_\_\_\_\_ C B B R \_\_\_\_\_

1.4. Cardholder surname, name on the payment card (please use letters of the Latin alphabet only)  
 \_\_\_\_\_

### 2. Payment Card, hereinafter referred to as the Card, Information

2.1. Card type:  
 Maestro  Maestro No Name  Mastercard Classic Red or  Mastercard Classic Grey  VISA Gold  Mastercard Gold  Mastercard Platinum

2.2. Card currency:  
 EUR  GBP  RUB

#### 2.3. Card credit limit:

2.3.1.  Desired credit limit \_\_\_\_\_ (Please specify the amount) 2.3.2.  No credit limit

#### 2.4. Deduction of interest on the credit limit used:

2.4.1.  Standard interest deduction 2.4.2.  Grace period up to 50 days

2.4.3. Please fill out the details below (clause 2.5) if you have specified the card credit limit.

#### 2.5. Collateral:

2.5.1.  Guarantee deposit \_\_\_\_\_ (Amount in digits and currency code) 2.5.2.  Without guarantee deposit

### 3. Additional service

3.1.  I want to connect the "Replenishing the Payment Card Account via phone" service (please specify a phone number from which the Bank will receive calls) Phone No. \_\_\_\_\_

3.3.  I hereby authorise the Bank to replenish the balance of the Payment Card Account using funds from the aforementioned Current Account, \_\_\_\_\_ (Amount in digits and in words) each business day of the Bank, up to the following amount:

#### 3.4. Travel insurance policy required:

No  Yes Travel insurance policy:  Classic  Gold  Platinum

When choosing a travel insurance policy, the card user agrees to processing of his/her personal data, incl. transfer and processing of data by **ERGO Insurance SE Latvian branch** (registered in the Commercial Register of the Register of Enterprises of the Republic of Latvia with No. 40103599913, registered address: Skanstes iela 50, Riga, LV-1013). Purpose of data processing: receiving a travel insurance.

### 4. Receiving the Payment Card and Priority Pass

4.1. I will receive my payment card and Priority Pass:  
 At the Bank  By post \_\_\_\_\_ (Correspondence address)  Other \_\_\_\_\_ (Please specify)

### 5. Confirmation

- 5.1. I hereby confirm that, by signing this Application, I wish to use the Card offered by the Bank in accordance with the Conditions of the Agreement on Opening a Payment Card Account, Issue and Servicing a Payment Card, hereinafter referred to as the Conditions. I am acquainted with the Conditions, the Bank's General Terms of Business (GTB) and Pricelist, agree to them and undertake full liability for transactions performed by the Cardholder. I am aware that all the documents approved by the Bank and amendments thereto that are listed above are available on the Bank's website www.blueorangebank.com or at the Customer Service Centre.
- 5.2. I am aware that this Application and the Conditions constitute an agreement, hereinafter referred to as the Agreement.
- 5.3. In the event of replenishing my Payment Card Account via phone, I agree that the Bank shall not be held liable for not replenishing the Payment Card Account if the Account Operator cannot identify the number of the incoming phone call. In such cases, this service can be accessed using Digipass.

**APPLICATION FOR OPENING A PAYMENT CARD ACCOUNT, ISSUING AND MAINTAINING A PAYMENT CARD FOR AN INTERNATIONAL INDIVIDUAL**

FILL IN USING BLOCK CAPITALS!

CONTINUATION

- 5.4. If travel insurance is applied for, I agree that the Bank reserves and/or charges the fee for a travel insurance policy from any account open for me at the Bank. I am informed that I can read travel insurance conditions at the Bank's website [www.blueorangebank.com](http://www.blueorangebank.com) or at the Customer Service Centre.
- 5.5. I am informed that the Bank processes data of natural persons in accordance with applicable laws and regulations on protection of personal data of the Republic of Latvia and European Union and the General Terms of Business. Purpose of data processing: opening and service of a payment card account.
- 5.6. I am informed that the Bank has the right to provide information to the Bank of Latvia and receive information from the Bank of Latvia Credit Register in accordance with the regulations applicable to the Bank of Latvia Credit Register (if a service related to a credit risk has been selected). I am aware that, in the event of a violation of credit obligations, the Bank will provide data on such violation to the Bank of Latvia Credit Register.
- 5.7. I am informed that the Bank has the right to request and receive information about a loan applicant from AS "Kreditinformācijas Birojs", reg. No. 40103673493, and to provide AS "Kreditinformācijas Birojs" with data on a loan applicant and their liabilities (if a service related to a credit risk has been selected).

5.8. Surname, name of the Client \_\_\_\_\_

5.9. Signature \_\_\_\_\_

5.10. Digipass key (Signature) \_\_\_\_\_

(Please specify the key if this document will be signed and sent to the Bank electronically)

**(This field is mandatory!)**Date of signing | | | |  
d d m m y y y y**6. Filled in by the person who accepted and verified the Application**

6.1. Surname, name \_\_\_\_\_

6.2. Signature \_\_\_\_\_