

## APPLICATION FOR ISSUE OF CORPORATE VISA PAYMENT CARD

### USER DATA (COMPANY)

User name: \_\_\_\_\_

Registered office (address, city): \_\_\_\_\_

Registration number: \_\_\_\_\_ Slovenian tax number: \_\_\_\_\_

Transaction account number: \_\_\_\_\_

Short user name for card: \_\_\_\_\_

(maximum 21 characters including spaces)

### INSURANCE, MONTHLY STATEMENTS AND ELECTRONIC DATA ON MONTHLY SPENDING

 standard insurance on a card

 above-standard insurance on a card

We wish electronic data on monthly spending in E-bank in txt form: YES NO

We wish paper monthly statements by post\*: YES NO

\*We charge for paper statements according to the applicable tariff. Electronic statements via E-bank and BusinessNet are free of charge.

### CARD HOLDER PERSONAL DATA

Name: \_\_\_\_\_ Surname: \_\_\_\_\_ Gender: M F

(maximum 21 characters including spaces)

Address of permanent or temporary residence: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Tax number: \_\_\_\_\_

Mobile phone no\*: \_\_\_\_\_ Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

\*mandatory for online shopping (3-D Secure)

Type of personal identity document: \_\_\_\_\_ Number of personal identity document: \_\_\_\_\_

Issuer of personal identity document: \_\_\_\_\_ Validity date of personal identity document: \_\_\_\_\_

### »Security SMS message« Service

I wish to receive »Security SMS messages«: YES NO

Mobile phone number on which you wish to receive »Security SMS messages«\*\*: \_\_\_\_\_

\*\*Receiving possible only on mobile phones of Slovenian providers

Please mark the Package of criteria for notifications:

| Package of criteria for notifications                       | Package 1           | Package 2      | Package 3      |
|---|---------------------|----------------|----------------|
|   | domestic and abroad |                |                |
| Notification on purchase at a POS terminal                  | every purchase      | over 50 EUR    | over 100 EUR   |
| Notification on ATM cash withdrawal                         | every withdrawal    | over 50 EUR    | over 100 EUR   |
| Notification on purchase with card over the phone, internet | every purchase      | every purchase | every purchase |
| Notification on purchase cancellation                       | every purchase      | every purchase | every purchase |

I hereby confirm the authenticity of all the above stated data and declare that I am acquainted with the General Terms and Conditions of Conducting Transactions with the Corporate Visa Payment Card. In case of ordering »Security SMS message« Service I state that I am acquainted with the General Terms and Conditions of »Security SMS message« Service for Legal Entities, Entrepreneurs and Independent Professional Occupations.

Place and date: \_\_\_\_\_, \_\_\_\_\_ Card holder signature: \_\_\_\_\_

turn ►

**MONTHLY OVERDRAFT ON CARD**

Amount of monthly overdraft on card for card holder: \_\_\_\_\_ EUR\*\*\*

\*\*\*Minimum 500,00 EUR

Settlement of obligations: 8<sup>th</sup> day of the month.

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**SIGNATURE OF USER (LEGAL REPRESENTATIVE / AUTHORIZED PERSON)**

I hereby confirm the authenticity of all the above stated data and declare that prior to signing this Application I have received a copy of the General Terms and Conditions of Conducting Transactions with the Corporate Visa Payment Card, that I am acquainted with them and that I fully agree with them.

In case of ordering »Security SMS message« Service I state that I am acquainted and that I fully agree with the General Terms and Conditions of »Security SMS message« Service for Legal Entities, Entrepreneurs and Independent Professional Occupations.

Place and date: \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Name, surname and signature of legal representative /  
authorized person and User's stamp**The Bank reserves the right to reject the Application without particular explanation.**

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**FILLED IN BY THE BANK**

Place and date: \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Name, surname and signature of bank's authorized person**Filled in by the back office of the bank:**

Registration number: \_\_\_\_\_

 new card additional card

Charging: YES \_\_\_\_\_

Amount of card overdraft for company: \_\_\_\_\_