



#### 4. Change of the Client's beneficial owners (BOs)

<b>1. Name, surname</b>			
<b>2. Rationale:</b>			
- directly or indirectly owns percent (%) of capital/voting shares out of the total number of shares issued by the Client:	_____ %	_____ %	_____ %
- direct or indirect control:	as a representative of an executive body or superior management institution on the basis of an authorisation agreement via a legal entity as the founder/assignor /trustee otherwise (please specify)	as a representative of an executive body or superior management institution on the basis of an authorisation agreement via a legal entity as the founder/assignor /trustee otherwise (please specify)	as a representative of an executive body or superior management institution on the basis of an authorisation agreement via a legal entity as the founder/assignor /trustee otherwise (please specify)
<b>3. Personal identification number</b>			
<b>4. Date of birth</b>			
<b>5. No. and series of the personal identification document</b> (if the BO does not have an identification document issued in the Republic of Latvia)			
<b>6. Citizenship</b>			
<b>7. Tax residence country</b> (if not Republic of Latvia)			
<b>8. Tax payer registration number</b> (if not Republic of Latvia)			
<b>9. Permanent residence</b> (address — street name, building, apartment number, city, state, postal code)			
<b>10. Mobile phone No.</b>			
<b>11. Is the BO a U.S. person?</b> (if "Yes", please fill out the U.S. Taxpayer Identification Form)	Yes No	Yes No	Yes No
<b>12. Is the BO a politically exposed person (PEP)?</b>	No PEP family member Yes Close associate of a PEP	No PEP family member Yes Close associate of a PEP	No PEP family member Yes Close associate of a PEP

4.1.1. The Client has more than 4 (four) BOs. Please fill out the Questionnaire about the beneficial owners (Annex No. 1).

4.1.2. Reason for changes \_\_\_\_\_

(Please specify the reason for changing the BO)

#### 5. Change of business activity (profile)

##### 5.1. Information on Client's business activities

5.1.1. Full description of the Client's business activities, scheme of planned Current account transactions  
(this scheme may be submitted separately):

5.1.2. I confirm that the aforementioned business activities do not require a licence or special permit at the place of business.

5.1.3. The aforementioned business activities require a licence or special permit at the place of business and I attach a copy of the licence and/or special permit.

5.1.4. Reason for changes \_\_\_\_\_

(Please specify the reason for changing the business activity)

IF THE CLIENT HAS DECLARED THE ACTIVITY TYPE CORRESPONDING TO THE DEFINITION OF A FINANCIAL INSTITUTION, THE FINANCIAL INSTITUTION QUESTIONNAIRE MUST ALSO BE COMPLETED.

## 5.2. Change of business partners

### 5.2.1. Incoming payments:

Name of partner	Country of incorporation (code)	Payment purpose	Country of servicing credit institution, if known

### 5.2.2. Outgoing payments:

Name of partner	Country of incorporation (code)	Payment purpose	Country of servicing credit institution, if known

5.2.3. Reason for changes \_\_\_\_\_

(Please specify the reason for changes)

## 5.3. Changes in planned Current Account transactions

### 5.3.1. MONTHLY Account turnover:

Total number of payments in your account (incoming and outgoing):

(Must check one box only)

Up to 50 payments

50–100 payments

More than 100 payments \_\_\_\_\_

(specify approximate number)

Client accounts' turnover	Up to EUR 15,000.00	From EUR 15,000.01 to EUR 100,000.00	EUR 100,000.01 and more (specify sum)
Planned maximum total volume of the incoming payments and maximum volume of a single incoming transaction			_____ EUR
Planned maximum total volume of the outgoing payments and maximum volume of a single outgoing transaction			_____ EUR
Planned maximum volume of cash deposits, including ATM cash deposits	_____ EUR		
Planned maximum volume of cash withdrawals, including ATM cash withdrawals	_____ EUR		
Planned maximum total volume of the incoming payments on the separate clients' funds account and maximum amount of a single incoming transaction (please fill if the Client is a financial institution)			_____ EUR

5.3.2. Reason for changes \_\_\_\_\_

(Please specify)

