

Change notification form

Client:
 Registered office/address:.....
 Company ID No./ Personal ID No.:.....
 Entered in the Commercial code maintained by, section....., file number.....
 (hereinafter referred to only as the „Client“)

1. Client's bank accounts:

Name of bank	Currency	Account number (IBAN)	Bank code

2. Communication channels:

Tel.: _____ **Fax:** _____
E-mail: _____ **Postal address:** _____

3. Authorised persons:

name and surname:					place of birth:			
personal ID No:					I am a politically exposed person:	yes		no
sex:	male		female		nationality:			
permanent residence address:								
tel:					email:			
ID card number:					Valid until:		Issued by:	

name and surname:					place of birth:			
personal ID No:					I am a politically exposed person:	yes		no
sex:	male		female		nationality:			
permanent residence address:								
tel:					e-mail:			
ID card number:					valid until:		Issued by:	

name and surname:					Place of birth:			
personal ID No:					I am a politically exposed person:	yes		no
sex:	male		female		nationality:			
permanent residence address:								
tel:					email:			
ID card number:					valid until:		Issued by:	

Date:

Client's signature: