



Account opening application – Companies / legal entities

Name	<input type="text"/>		
Registered Office			
Street	<input type="text"/>	Postal Code	<input type="text"/>
City	<input type="text"/>	Country	<input type="text"/>
Date of incorporation	<input type="text"/>	Country of incorporation	<input type="text"/>
Registration number	<input type="text"/>	Legal form	<input type="text"/>
If country of tax residence is different from country of registered office, please specify. <input type="text"/>			
Tax ID number	<input type="text"/>		
VAT ID number (if applicable)	<input type="text"/>		
VAT ID country (if applicable)	<input type="text"/>		
LEI code (if applicable for EMIR reporting)	<input type="text"/>		
Sector code	<input type="text"/>		
Industry code	<input type="text"/>		

Representative of the legal entity

(the duly authorised company representative(s) applying for the account opening)

Title	<input type="text"/>	First name	<input type="text"/>
Last name	<input type="text"/>	Date of birth	<input type="text"/>
City of birth	<input type="text"/>	Country of birth	<input type="text"/>
Civil status	<input type="text"/>	Nationality	<input type="text"/>
Second nationality (in case of dual citizenship)		<input type="text"/>	
Permanent address <i>(not an office or P.O. box)</i>		<input type="text"/>	
Postal code	<input type="text"/>	City	<input type="text"/>
Country	<input type="text"/>		
If country of tax residence is different from permanent address, please specify. <input type="text"/>			
Phone	<input type="text"/>	Mobile phone	<input type="text"/>
Work phone	<input type="text"/>	Fax	<input type="text"/>
E-mail	<input type="text"/>		
Profession/Job title (if retired please indicate former profession)		<input type="text"/>	
Ownership percentage (in case of joint account)		<input type="text"/>	

Additional personal information:

Do you qualify as a "US person"? *(please check at least one box)*

- ☐ No, I don't qualify as "US person"
- ☐ US citizen ☐ US resident ☐ US birthplace
- ☐ US person, due to dual citizenship
- ☐ US tax payer for any other reason (e.g. substantial presence test) - green card holder.

US Tin ID number or Social Security Number

Politically exposed person (PEP)

Do you have, or have you had, a senior political mandate or a senior position in the public sector?

- ☐ Yes ☐ No

If yes, please specify which country and position:

Do any close family members have or have had a senior political mandate or a senior position in the public sector?

- ☐ Yes ☐ No

If yes, please specify which country and position:

Inside information

Do you have access to privileged financial information (inside information), e.g. due to your profession or relationships, or is the company subject to any investment restrictions?

- ☐ Yes ☐ No

If yes, please specify the name(s) of the company (companies) and your position:

Additional representative

Title

First name

Last name

Date of birth

City of birth

Country of birth

Civil status

Nationality

Second nationality (in case of dual citizenship)

Permanent address *(not an office or P.O. box)*

Postal code

City

Country

If country of tax residence is different from permanent address, please specify.

Phone

Mobile phone

Work phone

Fax

E-mail

Profession/Job title (if retired please indicate former profession)

Ownership percentage (in case of joint account)

Additional personal information:

Do you qualify as a "US person"? (please check at least one box)

- ☐ No, I don't qualify as "US person"
- ☐ US citizen ☐ US resident ☐ US birthplace
- ☐ US person, due to dual citizenship
- ☐ US tax payer for any other reason (e.g. substantial presence test) - green card holder.

US Tin ID number or Social Security Number

Politically exposed person (PEP)

Do you have, or have you had, a senior political mandate or a senior position in the public sector?

- ☐ Yes ☐ No

If yes, please specify which country and position:

Do any close family members have or have had a senior political mandate or a senior position in the public sector?

- ☐ Yes ☐ No

If yes, please specify which country and position:

Inside information

Do you have access to privileged financial information (inside information), e.g. due to your profession or relationships, or is the company subject to any investment restrictions?

- ☐ Yes ☐ No

If yes, please specify the name(s) of the company (companies) and your position:

Nature of banking relationship

What is the main intended purpose of the account? (please check one or more boxes, as applicable)

- ☐ Private banking services ☐ Mortgage loan

- ☐ A separate [Beneficial ownership of funds statement](#) document is attached.

Note: Filling this form is not required for companies quoted on the stock exchange and companies where the capital is widely distributed (as an indication: no shareholder owns more than 25% of the capital).

The representative(s) confirm(s), declare(s) and certify(ies) that the funds do not and will not originate, directly or indirectly, from criminal activities.

What is the "economic" source of the assets to be transferred to the Bank? (How did you originally accumulate these funds?)

Please check the applicable boxes and enter further explanations on the origin of the assets (please check at least one box).

- ☐ Savings ☐ Company profits ☐ Sale of real estate
- ☐ Equity Funding ☐ Commissions ☐ Other

Please specify

What is the “geographic” source of those assets? (From which bank and country will they be transferred?)

Cash

Securities

What will be the amount and "format" (cash and/or securities) of the initial transfer to the account in EUR?

Cash

Securities

What is the expected total size of assets to be invested through the account in EUR?

Reference currency (the currency in which your portfolio is reported)

The Account Holder(s) prefers to receive correspondence in the following language:

☐ English ☐ Norwegian

The Account Holder hereby expressly authorises the Bank to disclose information, upon request or in some circumstances automatically, relating to the management of certain securities (shares, bonds and investment fund units) held by the Bank on a nominee account, to issuers, custodian banks, registrars or governmental authorities, where required by law, administrative regulations or agreements of the country of the issuer/custodian.

The Account Holder understands and acknowledges that according to various laws in different jurisdictions, including but not limited to Norwegian law, nominee registration of securities may not be allowed. Hence, the Account Holder herewith authorises the Bank, where required, to open in his name a segregated account (sub-account) with its custodian bank, where shares/securities held on his behalf will be deposited in his name.

Reduced withholding tax rates. *(please check one box to indicate your choice)*

- ☐ No, the Account Holder would not like to benefit from reduced withholding tax rates.
- ☐ The Bank is hereby notified that the Account Holder would like to benefit from reduced withholding tax rates on dividends/income from securities, provided that an applicable double taxation treaty is in force between the country of the issuer of a security and his/her country of tax residence. Hence, the Account Holder instructs the Bank to apply for reduced withholding tax on his/her respective holdings.

The Account Holder hereby declares that he is entitled to benefit from the tax treaties entered into force and signed by his country of tax residence, and confirms that he is the sole beneficial owner(s) of the funds/holdings to be deposited, now and in the future, into the custody account to be opened in his name.

The Account Holder acknowledges that in order to benefit from a reduced withholding tax rate it is mandatory to provide a **certificate of fiscal residence** (Tax Residence Certificate). The Account Holder acknowledges that failure to provide/renew required documents will make it impossible to apply reduced withholding tax rates.

The Account Holder acknowledges that the reduced withholding tax rate service is not available in all markets and is subject to licenses and/or agreements the Bank has entered into and other technical arrangements and will be provided on a best-effort basis. The Account Holder also acknowledges that this service only applies to cross-border holdings.

Note: Norwegian clients (tax residency in Norway) are not required to provide a certificate of fiscal residence.

The above mandates are given in order to allow the Account Holder to invest in particular securities in conformity with the relevant local laws, regulations and applicable double taxation treaties which require such disclosure, and to obtain reduced withholding tax rates. These specific mandates waive the Bank from its professional secrecy duty when disclosing the above-mentioned information. The Account Holder fully understands and acknowledges that providing the Bank with such a mandate and communicating the information to the relevant authorities or its sub-custodians might result in this information also being provided to certain third parties under the laws of the countries invested in. The Account Holder hereby acknowledges having been duly informed by the Bank about this and will not hold the Bank liable for any consequence deriving directly or indirectly from its performance of this specific mandate.

Unless written notice is given to the contrary, the Bank is authorised to act on all instructions received from the Account Holder in writing, by fax or phone with regard to his/her account. Written or faxed instructions must be duly signed. This also includes those who act on the Account Holder's behalf and have been notified in writing to the Bank as authorised by the Account Holder.

The Bank automatically records all incoming and outgoing telephone calls.

The Bank will normally communicate with the Account Holder through the means indicated above. However, the Bank does not consider e-mail a secure way of communicating. If the Account Holder wishes to communicate by e-mail, the Account Holder hereby authorises the Bank to send to representatives, at the Account Holder's entire risk, information which may be of a confidential nature to an e-mail address provided by the Account Holder, including but not limited to account statements. The Account Holder understands and acknowledges that such requests may include communication of data related to the account, personal data or any data within the scope of provisions on professional secrecy.

☐ No, the Account Holder does not wish to communicate with the Bank by e-mail (indicate by checking the box or not).

By signing this application the Account Holder requests that the Bank, which accepts, provides access to banking services via its internet site.

The Bank shall provide the Account Holder with all items required to access the e-banking services, as defined hereinafter.

Services: The Account Holder will initially be entitled to access the following services (hereinafter referred to as the "E-banking services"):

- Access to account statements
- Money orders / money transfers
- Webmail services.

The Bank may update the list of services offered at any time. The Account Holder will be informed by a webmail message.

Key codes

After accepting your application, the Bank will provide you with a User ID and an initial password. In addition, the Bank will provide you with a personal card with a specific code by separate mail.

(please check one box to indicate your choice)

- ☐ Each representative may instruct/sign alone
- ☐ All representatives must instruct/sign jointly
- ☐ Other instruction/signing rules (Please specify in a **separate document** (e.g. an authorised signature list or other relevant documents such as a board resolution)).

Please confirm agreement with the statements below by dating and signing your application and checking all the boxes.

- ☐ The Account Holder hereby acknowledges having received, read and understood a copy of and agrees with the Bank's "[General Terms and Conditions of Business](#)" (GTC), the Bank's "[E-banking services - Terms and Conditions](#)" and applicable [Pricelist](#) which shall govern all the Account Holder's relations with the Bank, unless otherwise specified by specific instructions. The Account Holder acknowledges having, at any given time, access to the GTCs, the "E-banking services – Terms and Conditions" and the [Framework to payment services](#) on the Bank's website: www.dnb.no/lu.
- ☐ The Account Holder acknowledges that the information to be provided in relation to holdings in cross-border securities and/or reduced withholding tax generally consists of some or all of the following elements: the securities owner's name, address, country of tax residence, tax identification number (alternatively company identification number in some countries), name of the securities (issuer) invested in, holding/participation, income amount and tax withheld.
- ☐ The Account Holder undertakes to immediately notify the Bank of any changes to the information he has provided, including but not limited to personal details of the beneficial ownership, and confirms that the address stated in the account opening application is his residence for tax purposes, and that he is not resident for tax purposes in any other country. The Account Holder undertakes to provide the Bank with an updated certificate of fiscal residence as applicable.
- ☐ The Account Holder moreover acknowledges that it is his responsibility to assess and fulfil any reporting obligations he may have towards the (tax) authorities of his country of (tax) residence/registration regarding the assets deposited with the Bank and the income derived thereof.

Date

Place

1st Account Holder representative

Name (please print)

Signature

2nd Account Holder representative

Name (please print)

Signature

If you want to provide additional representatives, please provide the names and specimen signatures in a separate document.

Please enclose or attach the relevant documents with this application.

Mandatory forms/documents:

- A certified* copy of the passport/ID card for all Account Holder's representatives,
- A recent (less than 3 months old) extract from the Commercial Register (“firmaattest”),
- An updated, certified copy of the articles of association/by-laws (“vedtekter”)(or equivalent); for trusts and foundations, the trust deed or foundation regulations, or equivalent documents.
- A copy of the register of shareholders (for trusts/foundations the list of beneficiaries if already determined, otherwise the name of the settlor(s))
- Beneficial ownership of funds statement - including a certified* copy of passport/ID card for each of the beneficial owner(s)

Optional forms/documents:

- ☐ [Power of attorney form](#) – including a certified copy of passport/ID card for the attorney(s)
- ☐ A valid company decision/authorisation for the company representative(s) to apply to open an account with DNB Luxembourg S.A., including signing instructions if applicable. This applies if the account opening application is to be signed by representatives who are not part of the company’s board of directors.

All documents must be either originals or certified copies.

*Documents can be certified by your account manager if he/she has seen the originals, by an authorised DNB Group employee, a competent authority (notary, police, embassy etc.) or a financial institution subject to equivalent regulations to combat money laundering and terrorist financing.

Should you have any questions regarding the completion of this form or required attachments, please do not hesitate to contact the Bank.