## **CHANGE REQUEST**



| Full name or trade name (legal entity)   |   |
|--|---|
|  | I I ODN   |
| irth number (date of birth if no birth numb  | per has been assigned) or CRN   |
| Contract number (select all or state the con   | ntract number(s))   |
| ALL  |   |
| case, the document authorizing the agent to a  | <b>ERSON/STATURORYBODY</b> Ited by a legal representative, authorized person or statutory body. In such a act on behalf of the Client is to be submitted, e.g. birth certificate, power of other official register indicating the manner in which the statutory body acts |
| Permanent address/place of business/register   | red office address  |
| Birth number (date of birth if no birth numb   | per has been assigned) or CRN   |
| Phone number (mobile)  | E-mail address  |
| ,  |   |
| "Client")  |   |
|  |   |
| 2. DATA CHANGE REQUEST   |   |
| ·  | hould be marked with a cross and entered in the required form)  |
| data you wish to have changed or added s   |   |
| data you wish to have changed or added s  Title, name, surname, business or other nar  | me  |
| data you wish to have changed or added s  Title, name, surname, business or other nar  |   |
| Title, name, surname, business or other nar Permanent address/registered office addre  | me  |
| data you wish to have changed or added s  Title, name, surname, business or other nar  Permanent address/registered office addre   | me  |
| data you wish to have changed or added s  Title, name, surname, business or other nare  Permanent address/registered office addre  Identity document type and number   | ess (street, post code, municipality/city, country):  |
| data you wish to have changed or added s  Title, name, surname, business or other nare  Permanent address/registered office addred  dentity document type and number  For a requested change to be executed, a nate  | ess (street, post code, municipality/city, country):  |
| data you wish to have changed or added s  Title, name, surname, business or other nare  Permanent address/registered office addre  Identity document type and number  For a requested change to be executed, a nate of the title agent or officially) and a legal entity service.  | ess (street, post code, municipality/city, country):  tural person submits a certified copy of a proof of identity (certified either by   |
| data you wish to have changed or added s  Title, name, surname, business or other nare  Permanent address/registered office addred  dentity document type and number  For a requested change to be executed, a nate of the company of t | ess (street, post code, municipality/city, country):  tural person submits a certified copy of a proof of identity (certified either by ubmits a current extract from the business register   |
| data you wish to have changed or added s  Title, name, surname, business or other nare  Permanent address/registered office addred  dentity document type and number  For a requested change to be executed, a nate of the company of t | ess (street, post code, municipality/city, country):  tural person submits a certified copy of a proof of identity (certified either by ubmits a current extract from the business register  r house number, post code, municipality/city, country):                      |
| data you wish to have changed or added s  Title, name, surname, business or other nare  Permanent address/registered office addre  dentity document type and number  For a requested change to be executed, a nate of the title agent or officially) and a legal entity service.   | ess (street, post code, municipality/city, country):  tural person submits a certified copy of a proof of identity (certified either by ubmits a current extract from the business register  r house number, post code, municipality/city, country):                      |

| Information about politica   | ally exposed persons                                  |   |   |       |
|--|---|---|---|-------|
| The Client is a politically e  | exposed person  | from  |   |       |
| The Client is not a political  | ally exposed person                                   | from  |   |       |
| E 13 DECLIEST FOR OTHER CHAN   | NGF (enecify and describe b                           | alow a a transfer of navn                               | nent, return of payment, contract terminati   | ion). |
| 13. REGUEST FOR OTHER OHAL   | TOE (specify and describe b                           | elow, e.g. transier or payi                             | nent, return or payment, contract terminat  | ion). |
|  |   |   |   |       |
|  |   |   |   |       |
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|  |   |   |   |       |
|  |   |   |   |       |
|  |   |   |   |       |
|  |   |   |   |       |
| 4. CLIENT'S REPRESEN   |   | rad to in Article 2 or a re                             | aguast under Artiala 2 will take affact f   | 0.5   |
|  | rvice of the original reque                           |   | equest under Article 3, will take effect fo<br>gistered office at: Einsteinova 24, 851 01 |       |
|  |   |   | in the request are accurate, full and truerein without undue delay. The Compar            |       |
| not liable for any damage incu   |   |   |   | 19 13 |
| Date   | Place   |   | Client's signature  |       |
|  |   |   |   |       |
|  |   |   |   |       |
| The Client's signature is to be officially auth  | nenticated whenever their request                     | has not been submitted to the C                         | Company through Tied agent.   |       |
| IDENTIFICATION AND IDENTIF   |   |   |   |       |
| To be completed when the requ  | est is submitted to the Com                           | pany through the Tied ag                                | ent   |       |
| Tied agent:  |   |   |   |       |
| Title, name, surname   |   |   |   |       |
| TIED AGENT DECLARATION   |   |   |   |       |
| Tied agent hereby declares that:   |   |   |   |       |
| <ul> <li>a) Having received this request, i<br/>Client) and verified their identi<br/>the Company and legislation o</li> </ul> | ty in the manner and in the                           | r any natural person who h<br>scope required by the Ger | nas signed the request on behalf of the<br>neral Business Terms and Conditions of         |       |
| b) The Client, or the person actin<br>request in their own hand befo   | ng on their behalf (legal repr<br>ore the Tied agent. | esentative, authorized pe                               | rson or statutory body) has signed the  |       |
|  |   |   |   |       |
| Date   | Place   |   | Tied agent's signature  |       |
| Date   | Place   |   | Tied agent's signature  |       |