# FORM F4

# REQUEST FOR ACCOUNT STATEMENT (ŽIADOSŤ O STAVOVÝ VÝPIS Z ÚČTU)

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| ***CDCP shall fill in this table after provision the service*** | |
| *Service code* | *SEMT.025* |
| *Pagina* |  |
| *Processing date* |  |

# CLIENT DETAILS (Údaje klienta)

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| 1. **Identification of an Account Owner** | |
| Trade name / Title, Name and Surname | Kliknutím zadáte text. |
| Registered office / permanent address[[1]](#endnote-1) | Kliknutím zadáte text. |
| Company ID/FRN/NIČ/birth number | Kliknutím zadáte text. |
| Tax ID[[2]](#endnote-2) | Kliknutím zadáte text. |
| VAT ID | Kliknutím zadáte text. |

# ADDITIONAL INFORMATION (Doplňujúce údaje)

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| 1. **Number of account for which the account statement is requested** | 1. **Date as at which the account statement is requested[[3]](#endnote-3)** |
| Kliknutím zadáte text. | Kliknutím zadáte text. |

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| 1. **Additional criteria for processing of the account statement[[4]](#endnote-4)** | |
| The client requests | **Particulars for selected criteria** |
| full account statement |  |
| acc. statement by specific ISIN | Kliknutím zadáte text. |
| acc. statement by Issuer Company ID | Kliknutím zadáte text. |

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| 1. **Method of collection of service output required by client** | |
| In the case of personal delivery of the application to the CDCP operating office: | The CDCP shall process the requested service and deliver the service output to the client in person. |
| In the case of delivery of the application by post or in person to the CDCP's mailing room: | The CDCP processes the requested service and sends the service output to the client by mail. |

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| 1. **Attached documents** | |
| Number of attached documents | Kliknutím zadáte text. |
| List of attached documents | Kliknutím zadáte text. |

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| 1. **Notes** |
| Kliknutím zadáte text. |

# STATEMENTS AND CONSENTS OF THE CLIENT (VYHLÁSENIA A SÚHLASY KLIENTA)

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| * By signing this form, the client declares and at the same time is liable for the data in this form to be complete, true and correct. * By signing this form, the client declares that he/she has read the Rules of Operation and the Schedule of fees of Centrálny depozitár cenných papierov SR, a.s. and that he/she agrees to follow their provisions. * By signing this form, the client acknowledges that Centrálny depozitár cenných papierov SR, a.s. will process his/her personal data in compliance with Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC and with Act No. 18/2018 Coll. On protection of personal data and on amendments and supplements to some acts. More information on processing of personal data of client are published on the internet page www.cdcp.sk in section Personal data security: **https://www.cdcp.sk/en/personal-data-security/** * By signing this form the client acknowledges that Centrálny depozitár cenných papierov SR, a.s. as an obliged person pursuant to article 5, section 1 (b)(1.) of the Act No.297/2008 Coll. has the obligation to process personal data for the purpose of prevention and detection of legalization of proceeds of criminal activity and terrorist financing, and that, at the same time, it is authorised for the purpose of customer due diligence and for the purpose of detection of unusual business operations pursuant to article 14 of the Act No.297/2008 Coll., even without the consent of the persons concerned, to identify, obtain, record, retain, use and otherwise process personal data and other data within the scope pursuant to article 10(1), article 11(3) and articles 12(1) and (2) of the Act No.297/2008 Coll.; while doing so, Centrálny depozitár cenných papierov SR, a.s. is entitled to obtain personal data necessary for reaching the purpose of processing by copying, scanning or other recording of official documents to information carrier and to process birth numbers and other data and documents without the consent of person concerned within the scope pursuant to article 10(1), article 11(3) and article 12(1) and (2) of the Act No.297/2008 Coll. |

**Date** Kliknutím zadáte text. **In Bratislava, on:**

**signature of the client CDCP stamp and signature of CDCP employee**

***Full name:***  *Kliknutím zadáte text.*

***Phone/email:*** *Kliknutím zadáte text.*

**The client confirms takeover of service output in the seat of CDCP on** \_ \_ \_ \_ \_

**signature of the client**

***Full name:***  *Kliknutím zadáte text.*

***INFORMATION FOR THE CLIENT:***

*Placement of requests and instructions for services and their required attachments is governed by the Rules of Operation of Centrálny depozitár cenných papierov SR, a.s. (further only „the Rules of Operation“).*

*It is possible to place the form duly filled in compliance with explanations included therein in* ***person*** *in the seat of CDCP, or* ***by mail*** *to the address of the CDCP’s registered office, unless the Rules of Operation states differently.*

*Provision of service in question is* ***charged*** *according to applicable Scale of Fees of CDCP.*

*This form can be signed on behalf of the client –* ***legal person*** *by representatives of the statutory body in compliance with a form of acting stipulated in the Companies Register or other records set by the regulation in which the client – legal person is registered (further only „official register“) OR by a person authorised to sign this form on behalf of the client – legal person on basis of the valid Power of Attorney. The client shall demonstrate the authorisation to act on behalf of a client – legal person, or to sign this form in compliance with the Rules of Operation as follows:*

*in case the form is signed by representatives of the* ***statutory body*** *of the client – legal person, it is necessary to submit to CDCP also the original or certified copy of excerpt from the Companies Register in which the client is registered as a legal person, that is not older than* ***6 months*** *(in case of a foreign legal person not older than* ***12 months****) on the day when representatives of the statutory body signed the form and also on the day when this service is provided,*

*in case the form is signed by an* ***authorised person****, it is necessary to submit to CDCP also the original or a certified copy of the Power of Attorney with officially certified signature of a donor of the power and the original or a certified copy of an excerpt from the Companies Register in which the client is registered as a legal person, that is not older than* ***3 months*** *(in case of a foreign legal person not older than* ***6 months****) on the day when representatives of the statutory body signed the Power of Attorney and on the day when this form is signed.*

*This form may be signed on behalf of a client -* ***natural person*** *by*

*directly by that natural person OR*

*b) a person authorised to sign this form on behalf of the client-natural person, on the basis of a valid power of attorney. In this case, the original or an officially certified copy of the power of attorney with the officially certified signature of the principal must also be submitted to the CDCP.*

*The client is obliged to attach this form with all documents required according to the Rules of Operation and relevant regulations.*

*Documents issued by an authority/office of a foreign state as well as the legalisation of signatures (i.e. the certification of the authenticity of the signature) and the vidimation of documents (i.e. the certification of a copy of the document) which have been drawn up abroad must also be accompanied by the relevant verification clauses (within the meaning of international treaties, the Hague Convention on the Abolition of the Requirement of a Higher Attestation of Foreign Authentication of Authentic Instruments, or the super-legalization procedures).*

***All documents submitted must always be originals or certified copies. A legalisation or vidimation clause, deed, Apostille or super-legalisation clause issued in a language other than Slovak or Czech must be officially translated into Slovak by a Slovak official translator.***

**Explanatory:**

1. Fill in the address – street, number of building, postal code, town, country. [↑](#endnote-ref-1)
2. Tax ID assigned by relevant authority in a country of tax residence. [↑](#endnote-ref-2)
3. If the date is not stated, CDCP shall make the acc. statement as of the day when service is provided [↑](#endnote-ref-3)
4. If no any of offered criteria is selected, CDCP shall make full account statement. [↑](#endnote-ref-4)