# FORM F9B

# INSTRUCTION FOR CANCELLATION OF REGISTRATION OF SUSPENSION OF DISPOSAL RIGHT TO BOOK-ENTRY SECURITIES

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| ***This table is to be filled-out by CDCP upon provision of service*** | |
| *Code of service* | *SEMT.013* |
| *Date of processing* |  |

Hereby the client submits the instruction for cancellation of registration of suspension of disposal right as:[[1]](#endnote-1)

**the owner of book-entry security** pursuant to § 28 (3) letter a) of the Act 566/2001 Coll.

**the pledgee** pursuant to § 28 (3) letter d) of the Act 566/2001 Coll. – provide following details:

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| The number of pledge agreement | Kliknutím zadáte text. |
| Value of secured claim | Kliknutím zadáte text. |
| Maturity date | Kliknutím zadáte text. |

**executor** pursuant to § 28 (3) letter i) of the Act 566/2001 Coll.

**offeror pursuant to §118i (1)** of the Act 566/2001 Coll.purs. to§28 (3) letter k) of the Act 566/2001 Coll.

other authorised person pursuant to § 28 par. 3 of the Act No. 566/2001 Coll.:[[2]](#endnote-2) Kliknutím zadáte text.

# CLIENT DETAILS

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| 1. **Identification data of AUTHORISED PERSON[[3]](#endnote-3)** | |
| Commercial name / Title, Name and Surname | Kliknutím zadáte text. |
| Seat /address of permanent residence[[4]](#endnote-4) | Kliknutím zadáte text. |
| Company ID/Foreign company ID/NIČ/Birth Registry number | Kliknutím zadáte text. |
| TAX ID[[5]](#endnote-5) | Kliknutím zadáte text. |
| VAT ID | Kliknutím zadáte text. |

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| 1. **Identification data of LIABLE PERSON[[6]](#endnote-6)** | |
| Commercial name / Title, Name and Surname | Kliknutím zadáte text. |
| Seat / address of permanent residence[[7]](#endnote-7) | Kliknutím zadáte text. |
| Company ID/Foreign company ID/NIČ/Birth Registry number | Kliknutím zadáte text. |
| TAX ID[[8]](#endnote-8) | Kliknutím zadáte text. |
| VAT ID | Kliknutím zadáte text. |

# ADDITIONAL DATA

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| 1. **The account number in which securities that are subject to cancellation of registration of suspension of disposal right are registered** |
| Kliknutím zadáte text. |

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| 1. **Details of securities that are subject to cancellation of registration of suspension of disposal right** | | |
| ISIN | Number of units/value | Identification of SDR |
| Kliknutím zadáte text. | Kliknutím zadáte text. | Kliknutím zadáte text. |

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| 1. **Date as of which registration of suspension of disposal right should be cancelled** |
| Kliknutím zadáte text. |

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| 1. **Method of collection of service output** | |
| If the instruction is delivered in person to CDCP operation workplace | CDCP shall process required service immediately and hands over the service output to the client |
| If the instruction is delivered via post or in person to CDCP mail room | CDCP shall process required service and sends the service output via post |

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| 1. **Enclosed documents** | |
| Number of enclosed documents | Kliknutím zadáte text. |
| The list of enclosed documents | Kliknutím zadáte text. |

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

# DECLARATIONS AND AGREEMENTS OF CLIENT

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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 stamp of CDCP and signature of CDCP employee**

***Name and surname:*** *Kliknutím zadáte text.*

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

**Hereby the client confirms collection of the output of requested service at the seat of CDCP on**

**Signature of the client**

***Name and surname:*** *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.*

***Signature of the client (of persons authorised to act on behalf of the client) must be officially verified if the instruction is sent via post to CDCP address or submitted in person to CDCP mail room.***

*Provision of service in question od* ***charged*** *according to the 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:*

1. *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* ***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 form and also on the day when this service is provided,*
2. *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*

1. *directly by that natural person OR*
2. *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 notes:**

1. Select one option. [↑](#endnote-ref-1)
2. State the authorised person with reference to the relevant legal provision. [↑](#endnote-ref-2)
3. Fill in data on person authorised pursuant to the Act No. 566/2001 Coll. to submit the instruction for cancellation of registration of suspension of disposal right. [↑](#endnote-ref-3)
4. State the address detailing the street, building number, postal code, city, state. [↑](#endnote-ref-4)
5. Tax identification number assigned in the state of the tax residence by the competent state authority

   [↑](#endnote-ref-5)
6. Fill in data on the owner of securities subject to cancellation of registration of suspension of disposal right. [↑](#endnote-ref-6)
7. State the address detailing the street, building number, postal code, city, state. [↑](#endnote-ref-7)
8. Tax identification number assigned in the state of the tax residence by the competent state authority [↑](#endnote-ref-8)