

## IDENTIFICATION OF THE BENEFICIAL OWNER

A

\_\_\_\_\_   
 Reference no./Corporate card account no.

### 1 – INFORMATION ABOUT THE APPLICANT/CORPORATE CARDHOLDER

\_\_\_\_\_   
 Last name of the applicant/Corporate cardholder

\_\_\_\_\_   
 Street/No. (address of residence)

\_\_\_\_\_   
 Country (country of residence)

\_\_\_\_\_   
 First name

\_\_\_\_\_   
 Zip code      Town

\_\_\_\_\_   
 Date of birth      Nationality

### 2 – IDENTIFICATION OF THE BENEFICIAL OWNER

The applying employee and/or corporate cardholder hereby declares that the money used to settle the credit card statement and/or collected by the card issuer in another way (please tick where appropriate, **tick only one**)

- A  belongs **solely to the applying employee and/or corporate cardholder;**
- B  belongs **solely to the company and/or the contractual partner according to the basic account application;**
- C  belongs **to the applying employee and/or the corporate cardholder and the company and/or the contractual partner according to the basic account application;**
- D  belongs **exclusively** to the following natural person(s):  
 (Please provide all relevant information below.)

Please include a good quality copy of the identification document (front and back) of the person(s) named below.

\_\_\_\_\_   
 First name/Last name

\_\_\_\_\_   
 Street/No. (address of residence)

\_\_\_\_\_   
 Zip code      Town

\_\_\_\_\_   
 Country (country of residence)

\_\_\_\_\_   
 Date of birth      Nationality

\_\_\_\_\_   
 First name/Last name

\_\_\_\_\_   
 Street/No. (address of residence)

\_\_\_\_\_   
 Zip code      Town

\_\_\_\_\_   
 Country (country of residence)

\_\_\_\_\_   
 Date of birth      Nationality

\_\_\_\_\_   
 First name/Last name

\_\_\_\_\_   
 Street/No. (address of residence)

\_\_\_\_\_   
 Zip code      Town

\_\_\_\_\_   
 Country (country of residence)

\_\_\_\_\_   
 Date of birth      Nationality

\_\_\_\_\_   
 First name/Last name

\_\_\_\_\_   
 Street/No. (address of residence)

\_\_\_\_\_   
 Zip code      Town

\_\_\_\_\_   
 Country (country of residence)

\_\_\_\_\_   
 Date of birth      Nationality

The applying employee and/or corporate cardholder undertakes to inform the card issuer of any changes without request.  
 Deliberately providing false information on this form is a criminal offense (document forgery according to Art. 251 of the Swiss Criminal Code).

\_\_\_\_\_   
 Town

\_\_\_\_\_   
 Date

\_\_\_\_\_   
 First name and last name (in block capitals)

Signature of the applying employee and/or corporate cardholder

\_\_\_\_\_   
 Signature

