

CUSTOMER DECLARATION FORM FOR LEGAL ENTITY (COMMERCIAL)

Please answer the questions/state the information requested below to enable the bank to comply with its obligations pursuant to the Act relating to measures to combat money laundering and the financing of terrorism, etc. The Act entered into force on 15 April 2009. All disclosures will be treated confidentially and in accordance with the Personal Data Act.

I. COMPANY/ORGANIZATION INFORMATION

Name	Org.nr.
Address	Registered in Register of Business Enterprises Central Coordinating Register of Legal Entities Other (please specify):
	Form of organisation (limited liability company, foundation, NUF (Norwegian registered foreign company), club, association, etc):
Postal code/City	Listed on a stock exchange: No Yes – If yes, on which exchange?

Company structure/Group affiliation: Is the enterprise part of a corporate group Yes No
If yes, explain the company structure on a separate sheet of paper.

If the enterprise is not registered in a public register, you must state the date of formation and the name of a contact person. The contact person may be: the general manager, business manager, proprietor or similar. If the contact person is a legal entity, please state the name of a natural person as the contact person, and for the natural person please state the name, address and national identity number/D-number. In addition, the natural person must establish his/her identity using an approved form of identification.

Date of formation: Contact person (name, address, national identity no. and function).

II. THE COMPANY'S ASSOCIATION WITH USA

1. Is the entity an American financial firm offering services within banking, finance, asset management, insurance or similar?
 Yes No

2. Is the entity an American and passive company? A passive entity is a company where:
 • 50% or more of gross revenue originates from passive income (dividends, interest, rents and royalties, and excluding income effectively connected with a trade or business)
 • 50% of the entities assets are in assets that produce or are held for the production of passive income.
 Yes No

3. Considers the company itself in any kind of association with USA or is in any other way subject to U.S. law?
 Yes No

4. If YES to any of the questions above, please quote the entity's GIIN-number (U.S. identification number):

III. OWNERS/BENEFICIAL OWNERS

Definition:

Beneficial owners mean natural persons who ultimately own or control a customer and/or on whose behalf a transaction or activity is being carried out.

A natural person shall in all cases be regarded as a beneficial owner if the person concerned:

- a) ~~Does~~ directly or indirectly owns or controls more than 25 per cent of the shares or voting rights in a company, with the exception of companies that have financial instruments listed on a regulated market in an EEA state or are subject to disclosure requirements consistent with those that apply to listing on a regulated market in an EEA state,
- b) ~~Does~~ exercises control over the management of a legal entity in a manner other than referred to in a),
- c) ~~Does~~ according to statutes or other basis is the beneficiary of 25 per cent or more of the assets of a foundation, a trust or corresponding legal arrangement or entity,
- d) ~~Does~~ has the main interest in the establishment or operation of a foundation, trust or corresponding legal arrangement or entity, or
- e) ~~Does~~ exercises control over more than 25 per cent of the assets of a foundation, trust or corresponding legal arrangement or entity.

Does the enterprise have private persons who directly or indirectly own and/or control more than 25% of the enterprise or the capital assets of the enterprise?

No Yes – Please specify on the next page.



Information concerning owner/beneficial owner no. 1

Is this person subject to US taxes?		Yes	No	Country of birth:	
Name:				National identity number/D-number (11 digits)*	
Address:				Tax ID number (ITIN)	
Postal code/City/Country:			Citizenship:		Holding/controlling share in %

Information concerning owner/beneficial owner no. 2

Is this person subject to US taxes?		Yes	No	Country of birth:	
Name:				National identity number/D-number (11 digits)*	
Address:				Tax ID number (ITIN)	
Postal code/City/Country:			Citizenship:		Holding/controlling share in %

Information concerning owner/beneficial owner no. 3

Is this person subject to US taxes?		Yes	No	Country of birth:	
Name:				National identity number/D-number (11 digits)*	
Address:				Tax ID number (ITIN)	
Postal code/City/Country:			Citizenship:		Holding/controlling share in %

Information concerning owner/beneficial owner no. 4

Is this person subject to US taxes?		Yes	No	Country of birth:	
Name:				National identity number/D-number (11 digits)*	
Address:				Tax ID number (ITIN)	
Postal code/City/Country:			Citizenship:		Holding/controlling share in %

Information concerning owner/beneficial owner no. 5

Is this person subject to US taxes?		Yes	No	Country of birth:	
Name::				National identity number/D-number (11 digits)*	
Address:				Tax ID number (ITIN)	
Postal code/City/Country:			Citizenship:		Holding/controlling share in %

*Date of birth required if a Norwegian national identity number/D-number has not been assigned.

Note: Please bring along documentation of the beneficial owners to meetings with the bank, e.g. transcript from the register of shareholders, financial statements/annual report or the like, which shows which persons ultimately own or control the enterprise.

III. PURPOSE AND INTENDED NATURE OF THE BANKING RELATIONSHIP

(tick the box(es) for the purpose(s) that apply)

Domestic payments

Will cash be used as a means of payment in the day-to-day operation of the enterprise? No Yes – If yes, please state the approximate requirements for cash deposits per month.

International payments

Is it probable that the enterprise will transfer funds to/from other countries amounting to more than NOK 200,000 per year?

No

Yes

To/from which country/countries:

Approx. amount per year:

Purpose:

Savings (Applies to all forms of savings, such as bank deposits, insurance, unit trusts and other investment funds, individual equities, etc.)

Origin of the funds (*Pertains to current and future deposits*):

Business operations Returns on investments Loans Rental income Other, what?

Does the enterprise invest on the behalf of others?

No

Yes – If this is not a part of the enterprise's ordinary area of activity, please state the name and national ID/org. no. of the person(s) on whose behalf the funds are being invested:

Financing

Overdraft facility Long-term financing Guarantees Leasing Factoring Other (please specify):

Insurance

Life Pension (mandatory occupational pension) Property & casualty

Other (please specify):

IV. ATTESTATION / SIGNATURE ON BEHALF OF LEGAL ENTITY

I hereby confirm that the above information, and the information on any attachments, is correct and complete.

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Place / date / signature(s)