



# FINANCIAL IDENTIFICATION FORM

## ACCOUNT HOLDER

BENEFICIARY NAME	<input type="text"/>		
	<input type="text"/>		
ADDRESS	<input type="text"/>		
	<input type="text"/>		
TOWN/CITY	<input type="text"/>	POSTCODE	<input type="text"/>
COUNTRY	<input type="text"/>		

## BANK

BANK NAME	<input type="text"/>		
	<input type="text"/>		
ADDRESS	<input type="text"/>		
	<input type="text"/>		
TOWN/CITY	<input type="text"/>	POSTCODE	<input type="text"/>
COUNTRY	<input type="text"/>		
ACCOUNT NUMBER	<input type="text"/>		
IBAN*	<input type="text"/>		
SWIFT / BIC	<input type="text"/>		

REMARKS\*\*

NAME + FUNCTION + SIGNATURE OF BANK REPRESENTATIVE\*\*\*

BANK STAMP \*\*\*

DATE\*\*\*

NAME + FUNCTION + SIGNATURE OF ACCOUNT HOLDER\*\*\*

DATE\*\*\*

\* If the IBAN Code (International Bank Account Number) is applied in the country where your bank is situated.

\*\* E.g. information on SEPA format, acceptance EUR

\*\*\* Obligatory