

Primary account holder

Last name and first names (underline the first name in use)		Personal identity number	
Street address		Postal code	City
The last four digits of your valid First Card xxxx-xxxx-xxxx-		Employee ID (travel expence system)	
Mobilephonenumber		E-mailaddress	
Company's information			
Official name of the company		Department/ Accounting unit	Business Identity Code
Street address		Postal code	City

Signature of the cardholder

Before signing the agreement I have read the agreement and Nordea Bank Abp's general card terms and conditions as well as the First Card account terms and I accept them. I have also read the product description. I assure that the information I have given above is correct.

Place and date

Signature and name in block letters

Employer

The person mentioned above is entitled to use the First Card and debit our account. We also confirm that the personal data above match with the data in our employee register and undertake to deliver the account information concerning the card to the cardholders.

Undertaking

We undertake to pay all payment obligations based on this agreement according to the agreement terms.

Place and date

Company's name or stamp

Signature of company representative and name in block letters

To be filled by First Card

Date	Handled by	Credit account number	Decision
		248105-	

Cardholder's identification data

(Foreign cardholders must also deliver a copy of their passport.)

Cardholder (All the information required)

Last name and first names	Citizenship	Personal identity number
ID document		Number of ID document
<input type="checkbox"/> driving licence	<input type="checkbox"/> passport	<input type="checkbox"/> ID card
<input type="checkbox"/> EU ID card		
Document granted by	Document granted on	Document valid until

☐ The cardholder/a person closely associated with the cardholder holds an important public position (PEP)
* PEP means a Politically Exposed Person who is or who has during the past 18 months been employed as the head of state, a minister, member of parliament, member of a political party's governing bodies, member of the supreme court, member of the supreme decision-making body auditing the state's treasury, member of the central bank's board, ambassador or chargé d'affaires, or general officer, or who holds or has during the past 18 months held a leading position in a company wholly owned by the state, or a manager, deputy manager and a member of the board in an international entity. Close family members (spouse, children and their spouses, parents) and close associates of such persons are also considered PEPs.

The cardholder is tax liable outside Finland (Obligatory information)

☐ Yes ☐ No

Cardholder's countries of taxation (if the cardholder is tax liable outside Finland)

Country(ies) of taxation

Tax Identification Number(s) (TIN)**

☐ None of my countries of taxation has given me a TIN

**Fill in the TINs in the same order as the countries of taxation

Company information (All the information required)

Company's official name	Business Identity Code	Telephone number
Postal address	Postal code	City

Identified by (All the information required)

Last name and first names	Personal identity number	
Place	Date	Signature

Notes by the bank

To be filled in by First Card	Handled by	Credit account no. 248105 -	Registered	Date
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