



First Card Executive Application / agreement Under corporate liability

First Card corporate card is orde	red for			
Last name and first names (underline th	ne first name in use)	Citizenship		Personal identity number
Street address		Postal code	City	
Mobile phone number	E-mail address			
Employee ID (travel expense system)	Department / Acco	ounting unit		
Cash withdrawals normally 5 000 euros/month, other, what?	Card's usage limit normally 10 000 euros/month, other, what?	To be printed	on the priority Pass MRS MS	
Company's information				
Official name of the company				Business Identity Code
Street address	Postal code	City		Telephone
	•			ter of Nordea Bank Abp. An approved a is integrated into the agreement.
account terms and conditions and	ove read the agreement and Nordea accept them. I have also read the pr ass and I accept them. I assure that	oduct description	n. Before signing the	agreement I have also read the terms
Signature of the cardholder				
Place and date				
Signature and name in block letters				
	undertake to deliver the account info			ne personal data above match with the ardholders. We have read the terms
Place and date				
Signature of company representative an	d name in block letters	Company's name	e or stamp	
To be filled in by Handled by First Card	Credit account no. 248105 -		Registe	ered Date





First Card Executive Application / agreement Under corporate liability Identification of corporate cardholder

Cardholder's identificat (Foreign cardholders n		er a copy o	f their pass	port.)			
Cardholder (All the informa	tion required)						
Last name and first names				Citizenship		Personal iden	tity number
ID document					Number of ID do	cument	
	assport	ID card	EU ID ca	ırd	Trainbor of 15 doc	Jumoni	
Document granted by				Document granted	I on	Document val	id until
The cardholder/a persor * PEP means a Politically E member of a political party' member of the central bank a company wholly owned b children and their spouses,	exposed Person who s governing bodies, c's board, ambassac y the state, or a mai parents) and close	o is or who has member of the dor or chargé d' nager, deputy r associates of s	during the past supreme court, affaires, or gene nanager and a r uch persons are	18 months been em member of the supi eral officer, or who h nember of the board	ployed as the head reme decision-makir olds or has during the I in an international	of state, a ministeng body auditing the past 18 months	he state's treasury, s held a leading position in
The cardholder is tax liable	outside Finiand (C	Joligatory Info	ormation)				
Yes No							
Cardholder's countries of taxa	ation (if the cardhol	der is tax liable	outside Finland)			
Country(ies) of taxation		T	ax Identification	Number(s) (TIN)**	□ None of	my countries of	tavation has
**Fill in the TINs in the same Company's information (A			ation		∟ given me	á TIN	
Official name of the company		· · ·		Business Identity	Code	Telephone	
Street address				Postal code	City		
Last name and first names	mation required)	1				Personal iden	tity number
							,
Place	Date	Sig	nature				
Notes by the bank							
To be filled in by Handle First Card	d by		dit account no. 3105 -		Regist	ered	Date

Nordea Bank Abp, Satamaradankatu 5, FI-00020 NORDEA, Finland, domicile Helsinki, Business ID 2858394-9, VAT number FI28583949

MKFC673PL 03.22



Nordea

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Company's information				
Official name of the company				Business Identity Code
Street address	Postal code	City		Telephone
	personal data s granting and use require saving the ement between the applicant and Nore			
account terms and conditions and a	ve read the agreement and Nordea Baccept them. I have also read the process and I accept them. I assure that the	duct description	a. Before signing the	agreement I have also read the terms
Place and date				
Signature and name in block letters				
	indertake to deliver the account inforr			e personal data above match with the rdholders. We have read the terms
Place and date				
Signature of company representative and	I name in block letters	Company's name	e or stamp	