

The following translation is provided for the customer's convenience only. The contractual language is German. Therefore, German legal documents are binding in all respects and constructions, meanings or interpretations in the German legal documents shall prevail in case of inconsistency with the English version.

Application for the Conclusion of a Basic Account Contract (Sec. 33 of the German Payment Accounts Act (*Zahlungskontengesetz* - ZKG))

Application received on	(Date)	
(Stamp of the Credit Institution)		
(Signature of the Employee)		

1. Application

I hereby apply for the conclusion of a basic account contract.

□ The basic account should be managed as a garnishment protection account (Sec. 850k of the German Civil Code). I assure that I currently do not have a garnishment protection account.

2. Personal Information

Ms./Mr.: (First Name(s) and Last Name)	
Date of Birth	
Place of Birth	
Address:	
Street and House Number:	
Postal Code and City:	

3. Information on the Intended Use of My Basic Account:



I intend to use the basic account primarily for deposits and withdrawals of cash as well as for payments (e.g., by transfer) using online banking, telephone banking, ATMs, self-service terminals, or similar.

4. Notes on the Basic Account:

- a) You are not required to purchase additional services to open a basic account. An additional service is, for example, if you are given the option to overdraw the account.
- **b)** According to the German Payment Accounts Act, you are not entitled to conclude a basic account contract if you primarily use your basic account for commercial purposes or for a full-time self-employed activity.

5. Information on Any Other Existing Payment Accounts:

The following information is needed to check whether you are entitled to open a basic account.

□ I do not currently have a payment account (e.g., checking account) in Germany.

□ I already have a payment account (e.g., checking account) in Germany.

If you already have a payment account in Germany, please provide the following information, as applicable. If you have multiple payment accounts, please provide the corresponding information on an additional sheet.

This payment account is with:	(Name of the managing institution)	
This payment account has the following IBAN number:	:	
This payment account is managed as a garnishment protection account:	🗆 yes 🗆 no	
□ The managing institution has terminated this payment account or has informed me that it will close this payment account.		
□ I have terminated this payment account.		
\Box Although I already have a payment account, I cannot actually use it for payment transactions for the following reasons*:		
\Box The balance in my account is garnished, and the account is not a garnishment protection account.		
□ Other:		
* If you cannot use this account for transfers, for example, because you have not been granted credit, this is not considered a		

reason.

6. Date and Signature:

Place, Date

Signature



7. Handover Note:

A copy of the completed form was handed over to the applicant

on (Date)

by (First Name(s) and Last Name as well as Signature of the Employee of the Credit Institution)