

A,B	PARTY BIC:	PARENT BIC:	
C,D,E	New	Modify	Close
F,G,H	Production	Pre-Production	Date:
I,J	Ref:	rel. Ref:	
K,L	Activation date:	Responsible CB:	

1. Party		Relevant GUI Screen
11	Party Long Name:	<i>New Party</i>
12	Party Short Name:	
13	Address	
13a	Street:	
13b	House Number:	
13c	Postal Code:	
13d	City:	
13e	State or Province:	
13f	Country Code:	

2. Party Minimum amount		
21	Auto-collateralisation:	<i>New Party</i>
22	Client collateralisation:	

New	Modify	Close
BIC:	PARENT BIC:	Activation date:

The Undersigned declare(s) to have the full capacity and authority to execute the TARGET2 form for and on behalf of the Participant requesting activation of the registration.

Date, Name(s) Signature(s)