

NOTIFICATION

pursuant to Section 12(7) of Act No. 279/2024 Coll. on Financial Transactions Tax
(hereinafter referred to as the “**Act**”)

(hereinafter referred to as the “**Notification**”)

Business name / Name:

Registered office address:

ID No.:

(hereinafter referred to as the „**Client**“)

hereby notifies

UniCredit Bank Czech Republic and Slovakia, a.s., pobočka zahraničnej banky, Šancová 1/A, 813 33 Bratislava (hereinafter referred to as the “**Bank**”) that it is not a taxpayer under the Act as at the date of the Notification, in connection with which the Client hereby solemnly declares that:

A. with reference to Section 3(2)(1), (2) and (5) of the Act, it is (*tick one of the options*)

the Social Insurance Agency

the Matica Slovenská national heritage organisation

the Slovak Academy of Sciences

the Health Care Surveillance Authority

a budgetary organisation, contributory organisation

a regional tourism organisation, a local tourism organisation, a tourism information centre

or

B. with reference to Section 3(2)(4) of the Act, it is (*tick one of the options*)

a civic association

a foundation

a non-investment fund

a non-profit organisation providing generally beneficial services

a special-purpose facility of a church or religious society

an interest association of legal entities

a research and development entity

an organisation with an international element

the Slovak Red Cross

and at the same time the scope of the Client's activity is (*tick at least one option*)

the protection and promotion of health; prevention, treatment, resocialisation of drug addicts in the field of health and social services,

the promotion and development of sport;

the provision of social assistance;

the preservation of cultural values;

the support of education;

the protection of human rights;

the protection and creation of the environment;

science and research;

organising and facilitating volunteer activities.



By signing the Notification, the Client declares that all information provided in the Notification is complete, correct, true and up to the 1st of April 2025. The Client is obliged to immediately notify the Bank of any changes in the above data.

The Client shall be liable to the Bank for any loss incurred by the Bank as a result of the provision of false information in the Notification.

The undersigned declares that he/she is authorised to act on behalf of the Client and is aware of the obligations and consequences set out in this Notification that will arise if any of the statements prove to be false.

In _____, on _____

On behalf of the Client:
(name, surname, title)

On behalf of the Client:
(name, surname, title)

Signature/s or a stamp:

Bank's records:

Notification received by the Bank on:

Client No. (CIF):

Verified on behalf of the Bank by: _____ (name, surname) _____ (branch / structure)

Date:

Signature of the Bank's employee:

