APPLICATION FOR DIGITAL BANKING SERVICES – Investment Fund (Partnership – Compartment)

**To: Eurobank Private Bank Luxembourg S.A. (the “Bank”)**

We, the undersigned (all partners appearing on Registrar certificate) **........................................................................................................ ......................................................................................................................................................** being the present individual Partners in the Firm (the name of partnership appearing on the certificate) **..........................................................................................................................................................................** hereafter referred to as “the Partnership”, having considered the **Terms and Conditions of Use of the Digital Banking Services incorporated in the General Terms Governing the Relationship between Client-Bank**, available at the Bank and the Bank’s website [www.eurobankpb.lu](http://www.eurobankpb.lu), decided as follows:

1. That the Partnership applies to the Bank for the provision of electronic and/or digital service and/or of other services through the Bank’s Digital Banking Services (including, without limitation, account opening) in respect to the account(s) that the compartment **...........................................................................................................................................................................................** with Registration/License Number **..............................** (the “Compartment”) maintains with the Bank (the “Compartment Account(s)”.
2. That the Partnership agrees and ratifies its acceptance of the Terms and Conditions of Use of the Digital Banking Services and the terms and conditions of any other documentation necessary for the provision and use of the Digital Banking Services of the Bank.
3. The Partnership authorises as Designated Digital Banking User(s) the below persons with the following authorities and/or requests modification to Digital Banking access of the below Designated Digital Banking User(s) (where applicable) in respect to the Compartment Account(s).

**DESIGNATED DIGITAL BANKING USER(S)**

|  |  |  |  |
| --- | --- | --- | --- |
| **\*1Access Level:** | **V:** | | View Only Role (no permissions for transactions). |
| **I:** | | Input Only Role (creates/inputs transactions without permission to execute those). |
| **A:** | | Authorise Only Role (can only authorise transactions to be sent - without permission to create them). |
| **F:** | | Full Access Role (can both create and authorise transactions). |
|  | | | |
| **\*2Signatory Group:** | | Does not apply if Access Level is VIEW or INPUT. | |
|  | | | |
| **\*3Daily Limits:** | | To be completed if AUTHORISE or FULL Access Level is selected. | |
|  | | If NO LIMIT is specified, the MAXIMUM ALLOWABLE LIMIT per transaction type will apply. | |

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|  | | **Designated User 1** | | **Designated User 2** | |
| **Type of Request** | | New Application  Access Modification | | New Application  Access Modification | |
| **Client Code** (for Bank use only) | |  | |  | |
| **Digital Banking User ID** (where applicable) | |  | |  | |
| **Full Name** | |  | |  | |
| **Identity Card/Passport No.** | |  | |  | |
| **DIGITAL BANKING SERVICES** | | | | | |
| **Access Level\*1** | | View  Input  Authorise  Full | | View  Input  Authorise  Full | |
| **Signatory Group\*2** | | A  B  C  D  E | | A  B  C  D  E | |
| **Daily Limits\*3** | |  | |  | |
| **a.** | Bulk (Mass/Payroll) Payments | € | | € | |
| **b.** | SEPA Transfers | € | | € | |
| **c.** | International Transfers | € | | € | |
| **d.** | Internal Transfers to Third Party(ies) | € | | € | |
| **e.** | Internal Transfers between Own Accounts | € | | € | |
| **Connection to All Compartment Accounts** | | Yes  No | | Yes  No | |
| **If No, specify the Compartment Account(s) to be connected** | | a. |  | a. |  |
| b. |  | b. |  |
| c. |  | c. |  |
| d. |  | d. |  |
| e. |  | e. |  |
| **Automatic Connection of All Future Compartment Accounts** | | Yes  No | | Yes  No | |
| **PAYROLL SERVICE** | | | | | |
| **Payroll Service** | | Yes  No | | Yes  No | |
| **Access Level\*1** | | Input  Authorise  Full | | Input  Authorise  Full | |
|  | | **Designated User 3** | | **Designated User 4** | |
| **Type of Request** | | New Application  Access Modification | | New Application  Access Modification | |
| **Client Code** (for Bank use only) | |  | |  | |
| **Digital Banking User ID** (where applicable) | |  | |  | |
| **Full Name** | |  | |  | |
| **Identity Card/Passport No.** | |  | |  | |
| **DIGITAL BANKING SERVICES** | | | | | |
| **Access Level\*1** | | View  Input  Authorise  Full | | View  Input  Authorise  Full | |
| **Signatory Group\*2** | | A  B  C  D  E | | A  B  C  D  E | |
| **Daily Limits\*3** | |  | |  | |
| **a.** | Bulk (Mass/Payroll) Payments | € | | € | |
| **b.** | SEPA Transfers | € | | € | |
| **c.** | International Transfers | € | | € | |
| **d.** | Internal Transfers to Third Party(ies) | € | | € | |
| **e.** | Internal Transfers between Own Accounts | € | | € | |
| **Connection to All Compartment Accounts** | | Yes  No | | Yes  No | |
| **If No, specify the Compartment Account(s) to be connected** | | a. |  | a. |  |
| b. |  | b. |  |
| c. |  | c. |  |
| d. |  | d. |  |
| e. |  | e. |  |
| **Automatic Connection of All Future Compartment Accounts** | | Yes  No | | Yes  No | |
| **PAYROLL SERVICE** | | | | | |
| **Payroll Service** | | Yes  No | | Yes  No | |
| **Access Level\*1** | | Input  Authorise  Full | | Input  Authorise  Full | |
|  | | **Designated User 5** | | **Designated User 6** | |
| **Type of Request** | | New Application  Access Modification | | New Application  Access Modification | |
| **Client Code** (for Bank use only) | |  | |  | |
| **Digital Banking User ID** (where applicable) | |  | |  | |
| **Full Name** | |  | |  | |
| **Identity Card/Passport No.** | |  | |  | |
| **DIGITAL BANKING SERVICES** | | | | | |
| **Access Level\*1** | | View  Input  Authorise  Full | | View  Input  Authorise  Full | |
| **Signatory Group\*2** | | A  B  C  D  E | | A  B  C  D  E | |
| **Daily Limits\*3** | |  | |  | |
| **a.** | Bulk (Mass/Payroll) Payments | € | | € | |
| **b.** | SEPA Transfers | € | | € | |
| **c.** | International Transfers | € | | € | |
| **d.** | Internal Transfers to Third Party(ies) | € | | € | |
| **e.** | Internal Transfers between Own Accounts | € | | € | |
| **Connection to All Compartment Accounts** | | Yes  No | | Yes  No | |
| **If No, specify the Compartment Account(s) to be connected** | | a. |  | a. |  |
| b. |  | b. |  |
| c. |  | c. |  |
| d. |  | d. |  |
| e. |  | e. |  |
| **Automatic Connection of All Future Compartment Accounts** | | Yes  No | | Yes  No | |
| **PAYROLL SERVICE** | | | | | |
| **Payroll Service** | | Yes  No | | Yes  No | |
| **Access Level\*1** | | Input  Authorise  Full | | Input  Authorise  Full | |
|  | | **Designated User 7** | | **Designated User 8** | |
| **Type of Request** | | New Application  Access Modification | | New Application  Access Modification | |
| **Client Code** (for Bank use only) | |  | |  | |
| **Digital Banking User ID** (where applicable) | |  | |  | |
| **Full Name** | |  | |  | |
| **Identity Card/Passport No.** | |  | |  | |
| **DIGITAL BANKING SERVICES** | | | | | |
| **Access Level\*1** | | View  Input  Authorise  Full | | View  Input  Authorise  Full | |
| **Signatory Group\*2** | | A  B  C  D  E | | A  B  C  D  E | |
| **Daily Limits\*3** | |  | |  | |
| **a.** | Bulk (Mass/Payroll) Payments | € | | € | |
| **b.** | SEPA Transfers | € | | € | |
| **c.** | International Transfers | € | | € | |
| **d.** | Internal Transfers to Third Party(ies) | € | | € | |
| **e.** | Internal Transfers between Own Accounts | € | | € | |
| **Connection to All Compartment Accounts** | | Yes  No | | Yes  No | |
| **If No, specify the Compartment Account(s) to be connected** | | a. |  | a. |  |
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| c. |  | c. |  |
| d. |  | d. |  |
| e. |  | e. |  |
| **Automatic Connection of All Future Compartment Accounts** | | Yes  No | | Yes  No | |
| **PAYROLL SERVICE** | | | | | |
| **Payroll Service** | | Yes  No | | Yes  No | |
| **Access Level\*1** | | Input  Authorise  Full | | Input  Authorise  Full | |
|  | | **Designated User 9** | | **Designated User 10** | |
| **Type of Request** | | New Application  Access Modification | | New Application  Access Modification | |
| **Client Code (for Bank use only)** | |  | |  | |
| **Digital Banking User ID (where applicable)** | |  | |  | |
| **Full Name** | |  | |  | |
| **Identity Card/Passport No.** | |  | |  | |
| **DIGITAL BANKING SERVICES** | | | | | |
| **Access Level\*1** | | View  Input  Authorise  Full | | View  Input  Authorise  Full | |
| **Signatory Group\*2** | | A  B  C  D  E | | A  B  C  D  E | |
| **Daily Limits\*3** | |  | |  | |
| **a.** | Bulk (Mass/Payroll) Payments | € | | € | |
| **b.** | SEPA Transfers | € | | € | |
| **c.** | International Transfers | € | | € | |
| **d.** | Internal Transfers to Third Party(ies) | € | | € | |
| **e.** | Internal Transfers between Own Accounts | € | | € | |
| **Connection to All Compartment Accounts** | | Yes  No | | Yes  No | |
| **If No, specify the Compartment Account(s) to be connected** | | a. |  | a. |  |
| b. |  | b. |  |
| c. |  | c. |  |
| d. |  | d. |  |
| e. |  | e. |  |
| **Automatic Connection of All Future Compartment Accounts** | | Yes  No | | Yes  No | |
| **PAYROLL SERVICE** | | | | | |
| **Payroll Service** | | Yes  No | | Yes  No | |
| **Access Level\*1** | | Input  Authorise  Full | | Input  Authorise  Full | |

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| **SIGNATURE MANDATE FOR ALL ACCOUNTS**  (Does not apply if Access Level is View or Input) | | | | | | | | | | | | |
| **Type** | **From**  **Amount**  **(€)** | **To**  **Amount**  **(€)** | **Total No.**  **of Signatures Required** | **Total Number of Signatures Required**  **per Group (if applicable)** | | | | | | | | |
|  |  |  |  | **Group A** | **And**  **/Or** | **Group B** | **And**  **/Or** | **Group C** | **And**  **/Or** | **Group D** | **And**  **/Or** | **Group E** |
| **BULK MASS PAYMENTS** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **BULK PAYROLL PAYMENTS** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **SEPA**  **TRANSFERS** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **INTERNATIONAL**  **TRANSFERS** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **INTERNAL TRANSFERS TO THIRD PARTY(IES)** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **INTERNAL TRANSFERS**  **BETWEEN**  **OWN ACCOUNTS** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **ALL TYPE OF TRANSACTIONS** |  |  |  |  |  |  |  |  |  |  |  |  |
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1. That any subsequent documents and/or applications and/or bank forms as these may be requested, from time to time, by the Bank relating to the modification and/or revocation of the access and/or authorities of the Digital Banking Designated User(s) and/or in general for the use of the Digital Banking Services (whether material or not) in respect of the Compartment Account(s) are signedare signed **by the authorised person(s) indicated in the mandate and/or instructions of the Partnership dated** **.......................... as this/these may be amended and/or replaced, from time to time, and communicated to the Bank** and as he/she/they shall consider appropriate.
2. That the Partnership represents to the Bank that the information given is true and correct and further acknowledge that the Bank may, in its absolute discretion, reject the Partnership’s application without assigning any reason thereto.
3. That the Partnership hereby irrevocably authorises the Bank to charge the Compartment Account(s) and any other bank account(s) with all transactions and fees resulting from the provision and use of the Digital Banking Services in accordance with the Bank’s “**Fee & Charges Schedule**” (if and to the extent applicable) without prior notice.
4. That it is acknowledged that the provision of electronic and/or digital service and/or of other services through the Bank’s Digital Banking Services remainat all times subject to the General Terms Governing the Relationship between the Client-Bank and the Partnership undertakes to deliver and/or make available the aforementioned terms to the above authorised persons, without undue delay.
5. That in the case of the payroll service the dispatch of the file to the Bank will be effected using the https protocol and the Bank will not be responsible for any damage that may be possibly sustained due to the failure of execution of any order that is due to mistaken filing of the data by the Designated User(s) or that is due to a technical fault or to any other reason which is not attributed to the Bank in its entirety. That the Bank, following the dispatch of the file by the Partnership, will carry out validations in order to confirm both the correctness of the payment details included in the file as well as the funds’ availability at the designated bank account to be debited.
6. That in addition to the above in respect to the payroll service by the Bank to the Partnership payments may be executed only from bank accounts that are available for use by the corresponding Designated User to whom the right of creation of a file or the right of approving the payment file was granted. It is also acknowledged that subject to the provisions of any other clause hereunder, the Bank may at any time and at its absolute discretion refuse to accept and execute any instructions included in the file created and sent by the Partnership, if the Bank believes that the instruction is irregular or fraudulent or unauthorised or unlawful beyond the access level of a Designated User.
7. That the Partners (andtheir authorised persons) hereby confirm and declare that they have carefully read and understood the content of the Privacy Notice of the Bank (available at the Bank and at the Bank’s website at [www.eurobankpb.lu](http://www.eurobankpb.lu)), regarding the processing of their personal data for the purposes of the carrying out of Partnership’s business and/or contractual relationship with the Bank and of their rights in this respect.
8. That the Partnership undertakes to deliver and/or make available the Privacy Notice of the Bank to the physical person(s) whose personal data were disclosed herein above and/or notify him/her of the aforesaid document, without undue delay.
9. That this mandate be communicated to the Bank and remain in force until revoked by us in writing, notwithstanding any change in the constitution or the name of the Partnership and shall apply notwithstanding any change in the membership of the Partnership by death, bankruptcy, retirement or otherwise of the admission of any new partner or partners and if your Bank may think the aforesaid proper.
10. That the Bank be furnished with a specimen of the signatures of the authorised signatories/designated digital banking users.
11. That all the acts and/or operations referred to the hereinabove be done and/or carried out by the said authorised person(s) either by attending in person and/or by using the services and/or systems which the Bank offers and/or may offer from time to time through the Bank’s electronic and/or other media.
12. Further, we, the undersigned, hereby declare and admit that any obligation of the Partnership created in whatever manner shall be our joint and several responsibilities as if we were jointly and severally guarantors of the obligations of the Partnership.

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| **All Partners of the Partnership** | | |
| **Signature** |  | **Signed by (PRINT NAME):** |
| ………………………………………………………………………… |  | **..............................................................................................** |
| ………………………………………………………………………… |  | **..............................................................................................** |
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(Affix seal, where applicable)

Date: **.....................**

(All alterations in this form should be initialed)

**IF THE FUND IS NOT SELF MANAGED, THE MANAGEMENT COMPANY SHALL COUNTERSIGN THIS**.

I/We have read and understood the contents of the above mandate and with the present, I/we hereby agree with the above and acknowledge that the Bank will rely on the information and representations provided therein in order to enable the Bank to provide the requested services.

For and on behalf of **....................................................................................................................................... [Management Company]**

|  |  |  |
| --- | --- | --- |
| **Signature** | **Signed by (PRINT NAME):** | **Date:** |
| ………………………………………………… | **.......................................................................................** | **.........................** |
| ………………………………………………… | **.......................................................................................** | **.........................** |

(Affix seal, where applicable)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **For Bank Use Only** | | | | | | | |
| Compartment Code: | |  | | | | | |
| Signature(s) Verified by:  (*full name and signature*) | | Initiated by:  (*full name and signature*) | | Checked by:  (*full name and signature*) | | Approved by:  (*full name and signature*) | |
|  | |  | |  | |  | |
| Date: |  | Date: |  | Date: |  | Date: |  |