

INFORMATION OF THE APPLICANT

Name		Register code	Field of activity	E-mail
Legal address		Postal address		Number of employees
CEO of the company		Phone	Fax	
Number of the account with Tallinn Business Bank		Monthly average turnover		
Accounts with other banks		Monthly average turnover		

INFORMATION OF THE OWNERS (over 10%)

Name	Ownership, %	Name	Ownership, %

SUBSIDIARY AND AFFILIATED COMPANIES

yes List them _____
no

EXISTING FINANCIAL OBLIGATIONS

Type of obligation	Creditor	Amount	Outstanding	Final Maturity	%	Collateral

REQUIRED GUARANTEE

Payment guarantee <input type="checkbox"/>	Advance payment guarantee <input type="checkbox"/>	Performance guarantee <input type="checkbox"/>	Bid guarantee <input type="checkbox"/>	Standby letter of credit <input type="checkbox"/>
Beneficiary		Beneficiary address		Register code
Beneficiary contact person		Phone (with country code)	Fax	
Guaranteed sum		Guarantee length " " y. - " " y.		
Confirmation of foreign bank (mark with "x")		Nature of guaranteed sum (invoice nr., contract and its nr. and s.o.) (In case of international guarantee the detailed information of goods that are bought is to be presented in English)		
unrequired <input type="checkbox"/> required <input type="checkbox"/>				Term according the contract: days
beneficiary <input type="checkbox"/> applicant <input type="checkbox"/>				

PROPOSED MAIN COLLATERALS

Collateral details, location, owner, market value, appraiser

PROPOSED ADDITIONAL COLLATERALS

Collateral details, location, owner, market value, appraiser

I confirm that I have reviewed the general terms and conditions of the bank and the Client Data Processing Principles, which are available on the website of the bank www.tbb.ee

I give my consent to the forwarding of my data to the third parties specified in the Client Data Processing Principles

I give my consent to the processing of the data and I am aware of the possibility to withdraw my consent

I would like to receive electronically additional information about the products and services of AS TBB pank and its partners and I give my consent to the sending offers

By signing this application I certify that all the information given above is correct and has a documentary evidence at bank's request.

Date " " a. The enterprise representative's signature _____
When providing a false data, bank has the right to reject the loan application or terminate the existing agreement due to its breach.

FILLED BY THE BANK

Application was accepted: Bank representative's name _____
date " " a. Bank representative's signature _____

AS TBB Pank offices

Vana-Viru kontor	Vana-Viru 7	15097	Tallinn	tel. (372) 6688 000	tel. (372) 6688 001
Estonia pst. peakontor	Estonia pst. 3/5	10043	Tallinn	tel. (372) 6688 060	tel. (372) 6688 065
Narva kontor	Kerese 4	20304	Narva	tel. (372) 3324 146	tel. (372) 6688 056