

Information required to prepare the contract documents
Please fill in all fields.

Contractual partner

Name/Company Full address

E-mail Telephone no. Nationality Date of birth

Preferred date for the safe deposit box opening (please schedule about 1h on site)

Date Time *alternative (optional):* _____
Date Time

Participating person(s) at the safe deposit box opening

Name 1 Nationality 1 Date of birth 1

Name 2 Nationality 2 Date of birth 2

Authorised person(s)

In the case of natural persons, the contractual partner is automatically authorised (does not have to be specified here).

- Additional authorisation 1

Name Full address

sole collective

Right to sign Telephone no. Nationality Date of birth

- Additional authorisation 2

Name Full address

sole collective

Right to sign Telephone no. Nationality Date of birth

Checklist:

Please bring with you to the appointment:

- Passport or ID of the contractual partner (**original**)
- Passport or ID of authorised persons (**original** or authentic. copy not older than 12 months)

Additionally for companies:

- **Authenticated** extract from the commercial register (not older than 12 months)
- Passport or ID of the persons signing for the company on the contract and of all persons acting vis-à-vis us (**original** or authenticated copy not older than 12 months)