



ABLV

Creditor's Claim Application for an Individual

Creditor information¹

Creditor

name, surname _____

Date of birth

day month year

Personal number

-
for the residents of Latvia only

Identification document

series and number _____

issuing authority, date and country of issue _____

Declared residential address

country _____ city _____

street, house No., apartment No., postal code _____

Contact information

phone _____ email² _____

Language of communication

Latvian Russian English

Information for communication with the creditor¹

Correspondence recipient

name, surname or company name _____

Correspondence address³

country _____ city / state / district / region _____

street, house No., apartment No., postal code _____

Creditor's claim (excluding the amount payable according to the Deposit Guarantee Law)¹

Claim

amount and currency _____

Ground for the claim

for example: deposits, bonds transferred into monetary claims, transfers of claim, provision of services or delivery of goods

Creditor's details for payment

Account / IBAN

Name of institution

SWIFT code

signature _____

¹ Obligatory section.

² If you agree to receive correspondence electronically during the liquidation process of ABLV Bank, AS in liquidation, please specify your email address.

³ Notifications, decisions, requests and other information will be sent to the correspondence address and/or email address specified in your creditor's claim application and/or via the Internetbank.

Documents enclosed¹

- copy of the application signer's identification document
- copy of the identification document of the creditor's representative (if the application is signed by the representative)
- representation documents (if the application is signed by the creditor's representative)
- documents certifying that the account is owned by the creditor²

documents supporting the claim that is related to provision of services or delivery of goods to ABLV Bank, AS in liquidation:

agreement _____
name, number and date

invoice _____
name, number and date

other documents

specify other documents

documents supporting the transfer of the Creditor's claim

agreement _____
name, number and date

certificate of inheritance _____
name, number and date

documents supporting the liquidation

other documents

specify other documents

other documents

specify other documents

Application is signed by³

- creditor
- representative (fill in the information on the creditor's representative)

Information on the creditor's representative

Representative

name, surname

Date of birth

day month year

Personal number

-
for the residents of Latvia only

Identification document

series and number

issuing authority, date and country of issue

signature

¹ The list of documents to be enclosed is informative and is not exhaustive. Sufficiency of documents will be assessed individually in each case and, if necessary, additional documents may be requested.

² If the Creditor has not submitted the payment details for the payment of the amount of the admitted claim and/or the documents evidencing the ownership of the account specified in the details, ABLV Bank, AS in liquidation has the right to apply a fee for the storage of monetary funds intended for the payment of the claim in accordance with Rates and Charges.

³ Obligatory section.

Confirmation

By signing this application, I agree to the General Terms of Liquidation of ABLV Bank, AS in liquidation (<https://www.ablv.com/en/legal/liik>) and confirm that I am aware and understand that submission and acceptance of the creditor's claim application does not mean automatic admission of the creditor's claim and that the decision on admission of the creditor's claim will be made upon review of all documents submitted.

By signing this application, I hereby confirm that I am informed that ABLV Bank, AS in liquidation, registration number: 50003149401, legal address: Building 1, 7 Skanstes Street, Riga, LV-1013, Latvia, phone: +371 6777 5222, fax: +371 6777 5200, email: info@ablv.com, processes the submitted personal data for the purpose of consideration of the creditor's claim and other reasonable purposes throughout the process of liquidation of ABLV Bank, AS in liquidation. I hereby confirm that I have read the information on the processing of personal data performed by ABLV Bank, AS in liquidation, its purposes, legal grounds, personal data recipients, sending of personal data abroad, rights and obligations of data subject and other information on the processing of personal data performed, which is available at www.ablv.com, and personal data processing requirements included in the General Terms of Liquidation of ABLV Bank, AS in liquidation and agree to them.

Date _____
 day month year signature

Place of signature _____
 city, country

ABL V Bank, AS in liquidation notes

I confirm that this application has been signed before me by the person specified in the application, whose identity I have verified from the valid identification document that is acceptable for entering the country.

As a result of identification, I have made by my own hand a copy of the identification document used for identification, which is enclosed to this creditor's claim application.

Date _____
 day month year employee's name, surname

 employee's signature