## Application form for the static data registration for the clearing service for the participant that is a participant in TARGET

## THE TIMESTAMP OF THE ELECTRONIC SIGNATURE BEARS THE DATE OF SIGNING THE DOCUMENT

New Modify Delete	Test environment Devironment	
Preferred activation date		

Registered name of the participant*	
VAT Payer Register, No	
Registration number	
Registered BIC of the participant for settlement of invoices and penalty payments	

Registered BIC in the clearing service											
(insert and fill in a separate section for each registered BIC)											
BIC											
Name*											·
Registered BIC of the participant for the											
interest payment for the balance of funds											
on the clearing cover account											
RTGS DCA corresponding to the											
registered BIC for pre-fund management											
Order to transfer the entire position of the clearing cover account											
corresponding to the registered BIC to the specified account at the											
end of each business day											
1. Credit transfer orders and payment return orders containing the letters of the Latin alphabet with Latvian diacritical marks											
		diacrit	ical ma	arks					1		
1.1 are accepted											
1.2 are not accepted											
2. File exchange will be conducted through the following means:											
2.1 file exchang	e servi	ce									
2.2 online communication											
3. The participant has joined the SEPA Credit Transfer Scheme of											
the European Payments Council (indicate the date of joining)											

## THE DOCUMENT HAS BEEN SIGNED ELECTRONICALLY WITH A SECURE ELECTRONIC SIGNATURE AND COMPRISES A TIME STAMP.

(first name, surname and position of the person having the right to represent the participant)

<sup>\*</sup>When entered in the system, the name may be represented in Latin characters without the Latvian diacritical marks.