



RaiConnect Service

REQUEST FOR CONTRACTING / DATA CHANGE / CANCELLATION OF SERVICE

USER INFORMATION

Date:

First name:

Surname:

PIN:

E-mail:

Note: E-mail address is mandatory for establishing and activating the RaiConnect service.

The RBA package users are not charged the monthly fee and entry fee for the RaiConnect service.

I would like to contract the RaiConnect service: Yes No

I would like to cancel the RaiConnect service: Yes No

I would like to change the RaiConnect service access data: Yes No

APPLICATION FOR CONTRACTING THE RAICONNECT SERVICE

By signing this Application for contracting the RaiConnect Service, I, hereby, explicitly represent and warrant that I am familiar with the contents of the General Terms and Conditions for the RaiConnect Service Use, which have the character of an agreement of indefinite duration, that I fully accept any and all provisions contained in the mentioned General Terms and Conditions and agree to their implementation.

I have been informed that the mentioned General Terms and Conditions are available also on the Bank's website www.rba.hr.

I, hereby, represent and warrant that all information stated in the Application herein are true and that I sign them herein as such in my own hand.

I am familiar with the fact that all information on data processing are contained in the document Rules of Personal Data Treatment of Raiffeisenbank Austria d.d., which is available in the branches and on www.rba.hr.

Signature: _____

REQUEST FOR CHANGE OF THE RAICONNECT SERVICE ACCESS DATA:

- change in personal data (name and surname)
- change in e-mail address

NEW DATA for the RaiConnect service use (fill only the data that is changed).

First name:

Surname:

PIN:

E-mail:

Note: E-mail address is mandatory for establishing and activating the RaiConnect service.

Signature: _____

STATEMENT ON CANCELLATION OF THE RAICONNECT SERVICE

I, hereby, cancel the Agreement on the RaiConnect Service Use.

The use of the service ceasing at the earliest on the day of Request being received by the Bank at a branch or the mail registry office or through mail, and at the latest within 8 days from the day of Request being received by the Bank.

Signature: _____

Filled by the Bank

Received by:

Acc. Manager ID No.:

OU:

Date:

Signature: _____