

Identification merchant form in GoPay payment system

Please fill all necessary information (green color). Provide additional information when acting on behalf of authorized person (white color).

Basic merchant information:

Type of business:	Individual			O Company		
Company name/first name and surname:				IČ (identification num	ber) ¹ :	
Place of business:					Nr.:	
Postcode:		Town:				Country:

Identification of the owner, the statutory body (a statutory body)

Surname:			Name:		
Date of birth/Identification Nr.:			Birthplace:		
Citizenship:			Sex:	O Man	Woman
Street of residence ³ :			Nr:		
Postcode:	Town	1:		Country:	
Passport Nr.:		Validity untill		Issued ⁵ :	

Identification of the authorized person acting⁶

Surname:			Name:		
Date of birth/Identification Nr.:			Birthplace:		
Citizenship:			Sex:	🔘 Man	🖲 Woman
Street of residence ³ :			Nr:		
Postcode:	Τον	wn:		Country:	
Passport Nr.:		Validity unti	<i>II:</i>	Issued ⁵ :	

I agree to the processing of personal data in the scope and purpose, as stated in the Terms and Conditions Payment System GoPay, with which I lwas acquainted. I agree to the required person (GOPAY s.r.o.) kept the documents that are attached to this form, and bought a copy of my identity. According to § 8 paragraph 2 point. a) of Act No. 253/2008 Coll. person is required (GOPAY s.r.o.) shall verify compliance with the representation in the form of identity card. I declare that I am not a politically exposed person as defined in § 4, paragraph 5, point. a) of Act No. 253/2008 Coll. or a person who is a politically exposed person in the relationship according to § 4 paragraph 5, point. b) of Act No. 253/2008 Coll.

To documents to be send, please enclose a copy of identity card (passport) of the owner, member's statutory authority / statutory body and an additional copy of an identification document (e.g. driver's license). If thecompany or individual is represented by a person acting, it is necessary to supply the original form or certified copy of power of attorney, a copy of identity card (passport) and an additional proof of identity (e.g. driver's license) of the acting person.

In

NOTES

Date

Verification carried out by representative:

Merchant (acting person)

1 If no ID assigned, indicate a similar number assigned abroad

3 Provide details of permanent residence

2 If no identification number assigned, please provide date of birth

Representative GOPAY s.r.o.

4 Unless the identity card, indicate the type of passport and its number 5 Indicate the institution (or State) identity card issued 6 Person acting under a power of attorney certified

GoPay payment system is operated by GOPAY s.r.o., EMI licensed institution in Czech Republic.