

A,B	<b>PARTY BIC:</b>		<b>PARENT BIC:</b>	
C,D,E	<b>New</b>	<b>Modify</b>		<b>Close</b>
F,G,H	<b>Production</b>	<b>Pre-Production</b>		<b>Date:</b>
I,J	<b>Ref:</b>		<b>rel. Ref:</b>	
K,L	<b>Activation date:</b>		<b>Responsible CB:</b>	

<b>1. Party</b>		Relevant GUI Screen
11	Party Long Name:	<i>New Party</i>
12	Party Short Name:	
13	Address	
13a	Street:	
13b	House Number:	
13c	Postal Code:	
13d	City:	
13e	State or Province:	
13f	Country Code:	

<b>2. Party Minimum amount</b>		
21	Auto-collateralisation:	<i>New Party</i>
22	Client collateralisation:	

New	Modify	Close
BIC:	PARENT BIC:	Activation date:

The Undersigned declare(s) to have the full capacity and authority to execute the TARGET2 form for and on behalf of the Participant requesting activation of the registration.

---

Date, Name(s) Signature(s)