

# Business relationship without a PostFinance account

For legal persons and partnerships, non-incorporated companies, sole proprietorship and other business types



Partner number  
(for internal purposes) \_\_\_\_\_

## 1. Registration/Change

Registration       Change

## 2. Basis of the restricted business relationship

Contract for a business relationship without a PostFinance account between PostFinance Ltd and the following contractual partner, hereinafter referred to as the "Customer":

Company/organization \_\_\_\_\_

Street \_\_\_\_\_ No. \_\_\_\_\_

Postcode \_\_\_\_\_ Location \_\_\_\_\_

Country \_\_\_\_\_

The Customer hereby confirms that he/she has received and acknowledged the applicable Subscriber Conditions for the product he/she has requested and recognizes their content as legally binding for the business relationship he/she has applied for with PostFinance. This contract expires automatically upon the termination of the last product contract or upon the conclusion of a PostFinance account business relationship subject to submission of a comprehensive basic agreement.

## What you have to do when sending us personal data about other people

If you are sending us personal data about other people (such as authorized representatives, controlling persons or heirs), you therefore confirm that you are authorized to do so and that the data is correct. Please ensure that these third parties have been informed before notification that we will process their data and send them a copy of the enclosed "Information on data protection" document or our privacy policy at [postfinance.ch/dps](http://postfinance.ch/dps).

## 3. Business information

Entry in the commercial register       Yes       No

Legal form

- |   |  |
|---|--|
| <input type="checkbox"/> Private limited company            | <input type="checkbox"/> Foreign legal form                    |
| <input type="checkbox"/> Simple partnership                 | <input type="checkbox"/> Sole proprietorship                   |
| <input type="checkbox"/> Cooperative                        | <input type="checkbox"/> Limited liability company             |
| <input type="checkbox"/> General partnership                | <input type="checkbox"/> Limited partnership                   |
| <input type="checkbox"/> Foundation                         | <input type="checkbox"/> Condominium/joint owners' association |
| <input type="checkbox"/> Association with a commercial aim  | <input type="checkbox"/> Association without a commercial aim  |
| <input type="checkbox"/> Public law corporation/institution | <input type="checkbox"/> Public administration                 |

No. of employees \_\_\_\_\_

Annual turnover in CHF




- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> 0 – 99,999   | <input type="checkbox"/> 100,000 – 499,999 | <input type="checkbox"/> 500,000 – 999,999 |
| <input type="checkbox"/> 1 m – 2.49 m | <input type="checkbox"/> 2.5 m – 4.99 m    | <input type="checkbox"/> 5 m and more      |




Sector \_\_\_\_\_



## 4. Signatures

In dealings with PostFinance, the following signatures are considered binding:

<input type="checkbox"/> Mr	<input type="checkbox"/> Ms	Signature	<input type="checkbox"/> sole	<input type="checkbox"/> collective*	<input type="checkbox"/> Group A	<input type="checkbox"/> Group B				
Last name		_____								
First name		_____								
Nationality		<input type="checkbox"/> CH	other	_____						<b>Customer should sign within the box</b>
Date of birth		_____								
Function		_____								
Location		_____								
Country		_____								
		Date		_____						

<input type="checkbox"/> Mr	<input type="checkbox"/> Ms	Signature	<input type="checkbox"/> sole	<input type="checkbox"/> collective*	<input type="checkbox"/> Group A	<input type="checkbox"/> Group B				
Last name		_____								
First name		_____								
Nationality		<input type="checkbox"/> CH	other	_____						<b>Customer should sign within the box</b>
Date of birth		_____								
Function		_____								
Location		_____								
Country		_____								
		Date		_____						

\* If needed, persons with collective signing authority may be divided into groups. This means that persons in group A may sign only with persons in group B or with persons not assigned to a group.

## 5. Identification

Legal form	Signatory's role	Required means of identification
AG (Aktiengesellschaft) private limited company GmbH (Gesellschaft mit beschränkter Haftung) limited liability company	Individual with commercial register entry	Extract from the Commercial Register Identification of all individuals listed on the application.
Cooperative	Individual with commercial register entry	Extract from the Commercial Register Identification of all individuals listed on the application.
General/limited partnership	Individual with commercial register entry	Extract from the Commercial Register Identification of all individuals listed on the application.
Foundation	Member of the Board of Trustees, Managing Director or individual with commercial register entry	Deed of Foundation and/or Extract from the Commercial Register Identification of all individuals listed on the application.
Sole proprietorship with or without a commercial register entry	Company owner or individual with commercial register entry	Extract from the Commercial Register Identification of all individuals listed on the application.
Simple partnership	Partner	Partnership agreement If not all the partners have signed the application, we will require a written proxy arrangement.
Association	Chairman, Cashier, Member of the Board of Directors	Extract from the Commercial Register or Articles of Association and an extract from the minutes detailing the current Board members. Identification of all individuals listed on the application.
Public administration Municipality, canton or government level (Confederation)	Representative vis-à-vis PostFinance	Proof of existence (Internet statement, legal texts, extract from national calendar, regulation, etc.) Identification of all individuals listed on the application.

Please enclose copies of the required **company/organization ID and signatory ID** (passport, identity card, Swiss driving licence or foreigners' residence permit) as per the table and send it along **with the product application** to:  
PostFinance Ltd, Scan Center, 3002 Berne

