|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| Application for changing the Schedule of Tariffs with LLC “Bank 131” | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **CLIENT DATA** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(full name of the legal entity/individual entrepreneur/lawyer/notary, full name)* | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INN (Taxpayer Identification number) / KIO (foreign company code) | | | | | | |  | | | | | | | | | | | OGRN (Primary State Registration number) / OGRNIP (Primary State Registration Number of the Individual Entrepreneur) / Registration No. | | | | | |  | | | |
| 1. **I REQUEST TO CHANGE THE PRICING PLAN** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ACCOUNT NUMBER, AGREEMENT NUMBER** | | | | | | | | | | | | | | | | | | | | | | | **NEW SCHEDULE OF TARIFFS OF THE ACCOUNT** | | | | |
|  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  | |  |  |  |  |  | |  | |  |
| Agreement of the Account dated /\_\_/ \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_No. | | | | | | | | | | | | | | | | | | | | | | |  | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  | |  |  |  |  |  | |  | |  |
| Agreement of the Account dated /\_\_/ \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_No. | | | | | | | | | | | | | | | | | | | | | | |  | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  | |  |  |  |  |  | |  | |  |
| Agreement of the Account dated /\_\_/ \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_No. | | | | | | | | | | | | | | | | | | | | | | |  | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **CLIENT’S SIGNATURE** | | | | |
| By completing and signing this Application I confirm that:  - I have read and agree with the Rules, Tariffs, Banking Rules and other documents of the Bank;  - I have read that previously existing individual tariffs will lose their validity, when connecting to the new Schedule of Tariff, that after changing the Schedule of Tariff, tariffs for services will be carried out strictly within the framework of the tariffs of the new Schedule of Tariff;  - I have read that tariff and payment conditions provided for by the Schedule of Tariff chosen by the Client come into force on the 1st day of the month following the month when the Schedule of Tariff was changed;  - I have read and agree that, on the basis of this Application, the Bank is amending the terms of service of the Account(s) indicated by me in the manner prescribed by the Tariffs.  All capitalized terms used in this Application have the same meaning as in the Rules, unless a different meaning of these terms is defined in this Application.  This Application is drawn up in two copies, having equal legal force, one for the Client and one for LLC “Bank 131”, or sent to the Bank via the SIO (Information Exchange System) in accordance with the Rules. This Application is drawn up in Russian and English. In case of discrepancies, the Russian text shall take precedence. | | | | |
| *L.C. (if any)* |  |  |  |  |
|  | *(Signature)* |  | *(Position, full name)*  **\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_ / 20\_\_** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **4. FOR BANK USE ONLY**   |  |  |  |  | | --- | --- | --- | --- | | The application was assigned No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of changing the Schedule of Tariffs: \_\_\_ / \_\_\_\_ / 20 \_\_  The Application was accepted and checked, Client was identified, the documents submitted by the Client, the authority of the person who signed the Application was verified by: | | | | | \_\_ / \_\_\_\_\_\_\_\_\_\_\_ / 20\_\_\_\_ | *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name and signature of Bank employee)* | | | | 1. *Agreement of the Account is* | amended | not amended |  | |

**Banking representative** *(position, fill name)*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**acting on the basis of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(number and date of the power of attorney)*

L.C.