

**APPLICATION FORM & AGREEMENT FOR EU QUALIFIED CERTIFICATE
FOR ELECTRONIC SEAL
(LEGAL PERSON)
ACCORDING TO EU PAYMENT SERVICES DIRECTIVE (PSD2)**

Fill in the fields in capital letters exactly as given in your identification documents (ID or passport).

- (1) Fields are filled in by ADACOM S.A.
- (2) Fields are included in the Certificate data.
- (3) Fields with data non verified by ADACOM.
- (4) Mobile phone number provided will be used for receiving PIN for Certificate pick-up or authentication credentials.
- (5) Please include the Country issuing the Identity Document.
- (6) Please include the Company Name or Distinctive Title as in the Articles of Association or in the Commercial Registry.
- (7) The authorization number or registration number issued by the local National Competent Authority which supervises the financial services of the Legal Person
- (8) The name of the local National Competent Authority which supervises the financial services of the Legal Person
- (9) Account servicing(PSP_AS) or payment initiation(PSP_PI) or account information (PSP_AI) or issuing of card-based payment instruments(PSP_IC)

Date:	(1)A/A:
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APPLICANTS DATA

Legal Person's name: ⁽²⁾

Type of entity : ⁽²⁾

Tax Identity Number (VAT) / National Trade Registry (NTR): ⁽²⁾

PSP Authorization Number: ^{(7) (2)}

National Competent Authority Name: ⁽⁸⁾

National Competent Authority ID:

Country: ⁽²⁾

Address and Post Code: ⁽³⁾

Telephone Number (fixed line): ⁽³⁾

Telephone Number (mobile): ⁽³⁾⁽⁴⁾

E-mail address: ⁽²⁾

PSP role (s): ⁽⁹⁾

Legal person's representative

First Name:

Last Name:

Title:

National ID or Passport Number:

This Application Form-Agreement is subject to the following terms which must be accepted by the Subscriber signing at the end of the document:

1. The identity of the Subscriber shall be effected in one of the following ways:

i) by the physical presence of Subscriber's authorized representative who submits to an ADACOM's RA or an LRA's authorized employee the following documents:

- Proof of the authorized representative's identity on the basis of a National ID (for Greece and Cyprus) or Passport issued by any other country, given that the document includes a unique number assigned to the applicant by the identity document issuing. ADACOM's RA or LRA's employee shall make a photocopy of the submitted identity document, which must be signed by the Subscriber and the authorized ADACOM's RA or an LRA employee;
- Proof of full name and legal status of the Subscriber on the basis of certified copies of organizational documents evidencing the official registration, the existence and operation of the legal person at the time of submission, issued not more than thirty (30) days before;
- Proof of representative's authorization to represent the Subscriber for the issuance of the EU Qualified Certificate for Electronic Seal on the basis of certified copies of related corporate documents.

OR

ii) by sending all the aforementioned documents in dully certified or notarized copies via courier or postal service to ADACOM's RA office. Certification or notarization of documents' copies is provided by a notary public, legal counsel or other official with comparable authority within the subscriber's/subject's jurisdiction.

The attestation of the above documents must be in the Greek, English, French or German language. In case of documents issued in other that the above languages, the attestation must be accompanied by an official translation in one of the above mentioned languages. The documents will be accepted if they have been certified within six (6) months before the submission of this Application form.

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2. This Agreement will become effective on the date of submission of this Application Form and Agreement for an EU Qualified Certificate to ADACOM. By submitting this Application, the Subscriber requests that ADACOM issues an EU Qualified Certificate for Electronic Seal to the Subscriber and expresses Subscriber's agreement to the terms of this Agreement. The Subscriber can complete the enrollment process within one month from the date of submission of this Application form. ADACOM's EU Qualified Certification Services are governed by ADACOM's applicable for EU Qualified Certificates Certification Practice Statement (the "CPS") as amended from time to time, as well as ADACOM's General Terms and Conditions for Use of EU Qualified Certificates, which are incorporated by reference into this Agreement and are published on the Internet in ADACOM's repository at <https://pki.adacom.com/repository> and are also available via E-mail from: Practices@adacom.com . Amendments to the CPS are also posted in ADACOM'S repository at <https://pki.adacom.com/repository> ;
3. Subscriber may require the non-publication of the certificate to ADACOM's Public Directory during the electronic enrollment that has to follow the submission and acceptance of the present;
4. Subscriber warrants and represents that any and all information provided for the issuance of the Certificate is complete, accurate and correct and that the Subscriber is legally eligible to submit this Application Form & Agreement; The information in the Certificate is correct. There are no errors or material misrepresentations of fact in the Certificate known to or originating from the entities approving the Certificate Application or issuing the Certificate.
5. EU Qualified Certificate for Electronic Seal is used only for approved and legal scopes, according to the ADACOM CPS and General Terms and Conditions;
6. Subscriber agrees to use a secure cryptographic device i.e. a qualified signature creation device (QSCD) which will be provided to the Subscriber by ADACOM according to the relative legislation and which is strictly personal, as well as the EU Qualified Certificate that will be issued and stored in this QSCD, and Subscriber is solely responsible for its use.
7. Subscriber owes to treat the QSCD as any object containing private data (for example a credit card). Under no circumstances is the Subscriber supposed to leave the QSCD exposed and following its use it should be placed in a secure location. Subscriber is not to lend Subscriber's QSCD or disclose its Access ID PIN, in case of a Local QSCD or the authentication credentials in case of a remote QSCD, to anyone.
8. No unauthorized person should ever have access to Subscriber's seal and encryption private keys.
9. Upon facing a problem or upon having suspicions that:
- i) Subscriber's private key has been lost, stolen, potentially compromised; or
 - ii) Control over the Subscriber 's private key has been lost due to compromise of activation data (e.g. PIN code) or other reasons; and/or
 - iii) Inaccuracy or changes to the certificate content.
- Contact ADACOM Customer Support at once at +30 210 95 77 255.**
10. Subscriber may request revocation of the Certificate via email at revoke@adacom.com or via phone at +30 210 9577255.
11. Subscriber is solely responsible for the payment of any fees, costs and indemnities associated with the Certificate's issuance and rekeying and the use of the Certificate.
12. Subscriber is bound to use exclusively the above mentioned types of QSCD which will be provided by ADACOM Otherwise ADACOM disclaims any responsibility and warranty regarding the appropriateness and compliance of the QSCD with the requirements of the applicable law.

NOTICE TO LEGAL REPRESENTATIVE REGARDING PERSONAL DATA PROCESSING

Categories of personal data

ADACOM keeps a record of information used during the registration, subject device provision and any other subsequent revocation, the identity and any specific attributes placed in the certificate.

Purpose of processing

ADACOM process personal data in order to issue digital certificates and provide consultancy services to the Subscriber.

Retention period

The record of digital certificates and the respective documents, is kept for at least 7 years or as required, in compliance with the applicable laws. The retention period is calculated from the expiration or revocation date.

Passing information to third parties in case ADACOM terminates its services

In case ADACOM terminates its services, all the aforementioned records and information will be transferred to another Qualified Trust Service Provider.

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The Applicant-Subscriber

Name/ Surname:

Title:

Signature:

(1)Authenticated by RA or LRA

Name/ Surname:

Title:

Signature:
