

ESIS Application Form

Issuer Agent Account Operator				
Company Data				
Company Name	LEI:			
	BIC (if any):			
National Registration Code:				
Contact Person Name	E-mail:			
	Phone Number:			
Service Subscription				
Shareholder Identification	Analytics Web Service			
Meetings (notice of participation and voting)	ESIS ID Tax Desk			
User Data*				
User - Administrator 1				
First Name:	Last Name:			
Preferred Language English Estonian German	Icelandic Latvian Lithuanian			
Email Address:	Phone Number:			
Receive notifications and reminders from ESIS by email	Yes No			
User - Administrator 2 (Optional)				
First Name:	Last Name:			
Preferred Language English Estonian German	lcelandic Latvian Lithuanian			
Email Address:	Phone Number:			
Receive notifications and reminders from ESIS by email	Yes No			

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^{*} Nasdaq CSD will create only Administrator users in the ESIS system. Each Administrator will be responsible for client user management.

SOAP User - Web S	Service (Optional)		
IT Email Address		IP Adress/es	
IT Phone Number			
Name of the third-p	party system		
We certify that the i	nformation in this application is complete, t	rue, and accurate	2 .
Client-Authorize	d Person:		
FIRST AND LAST N	AME (in capital letters)		
(Signature)		(Date)	
Nasdaq CSD SE:			
FIRST AND LAST N	AME (in capital letters)		
(Signature)		(Date)	

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