

REGISTRATION WITH THE CROSSROADS BANK FOR ENTERPRISES (CBE) COMMERCIAL COMPANY

1. GENERAL INFORMATION

DATE OF COMMENCEMENT OF ACTIVITY:/...../.....

2. CLIENT CONTACT DETAILS

NATURAL PERSON

NATIONAL REGISTER NUMBER OR "BIS" NUMBER (for non-Belgian nationals):

Surname : Forename :

If you do not yet have a national number or BIS number:

Date of birth/...../..... Place of birth..... Nationality :

CONTACT DETAILS ABROAD

Street : N° P.O Box

Post code : Town/city : Country :

Tel. : GSM : Fax :

Email : Website :

Bank account N° :

IBAN : BIC :

LEGAL ENTITY - COMPANY

Company number :

Company name :

If your company (abroad) does not yet have a company number, please complete the data below:

Street : N° P.O Box

Post code : Town/city : Country :

Tel. : GSM : Fax :

Email : Website :

COMPANY FINANCIAL DATA

Bank account N° :

IBAN : BIC :

3. ADDRESS FOR CORRESPONDENCE (to be completed if this differs from the address above)

Street : N° P.O Box

Post code : Town/city :

CONTACT INDIVIDUAL

Surname : Forename :

Street : N° P.O Box

Post code : Town/city :

Tel. : Mobile : Fax :

Email :

4. INFORMATION CONCERNING THE BUSINESS UNIT (operational head office)

Company name / Brand name :

ADDRESS OF THE BUSINESS UNIT (where you carry out your activities):

Street : N° P.O Box

Post code : Town/city :

Tel. : Mobile : Fax :

Email : Website :

ACTIVITIES CARRIED OUT HERE: (Please see last page)

Information concerning other business units (please provide data concerning the address and description of activities):

.....
.....

5. EXPERTISE

Please enclose supporting documentation (diplomas, certificates, proof of practical experience, etc...) required for the company's expertise for this signed form.

CONTACT DETAILS OF THE INDIVIDUAL SUBSTANTIATING BASIC MANAGEMENT KNOWLEDGE:

NATIONAL REGISTER NUMBER OR "BIS" NUMBER (for non-Belgian nationals):

Surname : Forename :

If you do not yet have a national number or BIS number:

Date of birth/...../..... Place of birth..... Nationality :

CONTACT DETAILS ABROAD

Street : N° P.O Box

Post code : Town/city : Country :

Tel. : Mobile : Fax :

Email :

Link with the applicant / Position within the company. :

THE REPRESENTATIVE IN RESPECT OF BASIC MANAGEMENT DECLARES, ON THEIR HONOUR:

- That they are not involved in ANY other professional activity;
- That they are involved in another professional activity on behalf of a third party, namely:

.....
.....

CONTACT DETAILS OF THE INDIVIDUAL SUBSTANTIATING EXPERTISE FOR REGULATED ACTIVITIES:

NATIONAL REGISTER NUMBER OR "BIS" NUMBER (for non-Belgian nationals):

Surname : Forename :

If you do not yet have a national number or BIS number:

Date of birth/...../..... Place of birth..... Nationality :

CONTACT DETAILS ABROAD

Street : N° P.O Box

Post code : Town/city : Country :

Tel. : Mobile : Fax :

Email :

Link with the applicant / Position within the company. :

THE REPRESENTATIVE IN RESPECT OF BASIC MANAGEMENT DECLARES, ON THEIR HONOUR:

- That they are not involved in ANY other professional activity;
- That they are involved in another professional activity on behalf of a third party, namely:

.....
.....

Data for other individuals substantiating entrepreneurial capabilities. (Please provide contact details and the roles of these individuals):

.....
.....
.....

DECLARATION OF DELEGATION: (If the professional expertise is substantiated by a representative, please complete for us the declaration of delegation below)

Between the undersigned

The applicant / head of the company:

Surname : Forename :

and

the representative:

Surname : Forename :

The following has been agreed:

The **first named party** assigns to the second party named:

- Day to day management;
- Technical management of the following sector of activity:
.....

The **second named party** acting in the capacity of:

- Assistant: spouse, cohabiting partner, other (family link if any) (please specify)
- Employee
- Active partner, director, manager
- Other (please specify)

SIGNATURE OF APPLICANT / HEAD OF COMPANY

SIGNATURE OF THE REPRESENTATIVE

6. CONTACT DETAILS OF THE PROXY

NATIONAL REGISTER NUMBER OR COMPANY NUMBER :

Surname / Commercial name :

If you have a Partena intermediary number:

Tel. : Mobile : Fax :

Email :

Declares that they are in possession of a mandate from the client. Please enclose the proxy document with the file.

RESERVED FOR ACCOUNTANTS AND INTERMEDIARIES

NATIONAL REGISTER NUMBER OR COMPANY NUMBER :

Surname / Commercial name :

If you have a Partena intermediary number:

- Financial documents must be drawn up in the name of the client and sent to the client.
- Financial documents must be drawn up in the name of the client and sent to the accountant.
- Financial documents must be drawn up in the name of the accountant.

Do you wish to obtain an intermediary No. or an e-account ? YES NO

7. USE OF EXISTING DATA

- By this present document, I give my agreement to the use of these data and to them being shared with other Partena departments
- By this present document, I do not give my agreement to the use of these data or to their being shared with other Partena departments

PLEASE NOTE: When sending this form, please do not forget to ENCLOSE THE DOCUMENTS PROVING THE REQUIRED KNOWLEDGE (diplomas, certificates, professional practice, etc.)

I DECLARE THAT I HAVE BEEN INFORMED OF THE PRINCIPLES FOR ACCESS TO THE PROFESSION AND TO THE REGULATED ACTIVITIES AND THAT I AM AWARE OF THE FOLLOWING PROVISIONS:

- Any natural person practising an independent professional activity in Belgium by virtue of which they must be registered with a social insurance fund for independent/free-lance/self-employed workers, must register, at the latest, by the date of commencement of the independent activity;
- An independent/free-lance/self-employed worker carrying out an independent activity for which they are not registered with the Crossroads Bank for Enterprises (CBE), may be penalised:
- In the case of non-compliance with these obligations, by an administrative fine of €500 to €2,000 which may be applied, per contravention found to have taken place.
- Legal entities are jointly required to pay the administrative fine imposed on their partners or representatives.

DONE AT: DATED:

SIGNATURE OF THE APPLICANT / HEAD OF THE COMPANY

ACTIVITIES CARRIED OUT

in the case where the NACE codes have not been set at the time of the present declaration, the undersigned declares that they agree with the NACE codes that will be fixed by the Enterprise counter on the basis of the description of the activity contained in the present document.

NACE CODE	ACTIVITIES CARRIED OUT BY THE COMPANY REGULARLY
NACE CODE	ACTIVITIES CARRIED OUT BY THE COMPANY OCCASIONALLY

"Note concerning the protection of privacy: data of a personal nature that you communicate to us is intended to be processed by the Enterprise counter PARTENA in the context of its legal mission as defined by the Code de droit économique [Economic law], Livre III, Titre 2, art. 15 to 73, relating to the creation of a Banque-Carrefour des Entreprises and of enterprise one-stop shops. With the exception of medial and social data of a personal nature, these data will be processed for the purpose of providing the promotion of the PARTENA services as well as those of other partners. By virtue of the law of 11 December 1998 (A.R. 13.02.2001), you are entitled to access or correct your personal data. If you do not wish your data to be used for the purposes described above, please let us know, either by sending us an email to back.office.gea@start.partena.be, or by sending a letter to the service "Coordination Technique " department of the Enterprise counter PARTENA, boîte postal 22000, 1000 Brussels."

OTHER ADMINISTRATIVE FORMALITIES

Please select the administrative formalities that the Enterprise counter PARTENA can carry out for you.

Please note: certain formalities require specific documents to be completed. These will be presented to you at the time of your visit or sent off by you.

(It is necessary to complete page 5: Enterprise counter PARTENA Proxy, if you select formalities from those listed below.)

Activation of VAT

- Estimated turnover:
- Activities:
 - exclusively operations other than those referred to by Article 44 of the VAT Law that do not give entitlement to any deduction (ordinary taxpayer)
 - partly operations referred to by Article 44 of the VAT Law that do not give entitlement to any deduction, and partly operations that do give entitlement to deduction (tax payer with entitlement to partial deduction)
- VAT regime:
 - normal VAT regime with monthly declarations
 - normal VAT regime with quarterly declarations
 - flat rate VAT regime
 - tax exemption regime
 - special regime without VAT declarations
- Has a business buy-out taken place? YES NO: if so, please provide details:
 - transferor company number :
 - name or company name of the transferor:
 - business buy-out: total partial
 - acquisition of current VAT account balance opened in the name of the transferor: YES NO

AFSCA foodstuffs authorisation application

The sale of your food products concerns (delete where in applicable):

- Fresh produce
- Packaged products with a 3 month expiry date (please specify the produce type:.....
.....
.....)

Butcher / pork butcher licence

Authorisation to carry out ambulant sales

Authorisation to carry out stall and fair related activities

Social insurance registration for PARTENA (ASI) independent traders

- for you yourself
- for your company (in the context of the obligation of registration for company contributions)

Do you already employ staff or do you intend to recruit staff?

- immediate recruitment of an employee requiring registration with the Secrétariat Social PARTENA
- recruitment of an employee in the future: information needed concerning conditions to be fulfilled as an employer

Do you wish to receive, for the company manager(s), a salary slip detailing the deduction for pay as you earn? YES NO

PROXY FOR THE ENTERPRISE COUNTER PARTENA

The undersigned residing at.....

acting

in their own name

on behalf ofwhose head office is located at

by the present proxy confers upon the Enterprise counter PARTENA Rue des Chartreux, 45 à 1000 Bruxelles the authority to carry out all operations with a view to:

the activation of V.A.T.

an application for authorisation by the AFSCA for the sale of foodstuffs,

an application to the SPF Economie for a butcher / pork butcher licence,

an application for authorisation to carry out ambulant sales,

an application for authorisation to carry out stall and fair related activities,

Social insurance registration for PARTENA independent workers/free-lances,

Registration as an employer with the PARTENA Secrétariat Social,

and this shall be solely on the basis of the information provided by the undersigned.

DONE AT: DATE:

CERTIFIED TRUE AND ACCURATE,
SIGNATURE,