Securities code (ISIN) application form
debt securities

To be completed by the Central Depository!	
ISIN:	
Date of ISIN allocation:	

1. Issuer data:

1/a. Type:
- ☐ state
- ☐ central bank
- ☐ municipality
- ☐ credit institution
- ☐ mortgage bank
- ☐ other business organization with legal entity or the subsidiary of foreign business organization with legal entity
- ☐ international organization or foreign organization entitled to issue bonds under its own law
- ☐ organization entitled to issue debt securities in separate law
- ☐ other: ……..…[1]

1/b. Official full name: _____

1/c. Short name: _____

1/d. Seat (zip code, city, street, house number):
☐☐☐☐ _____

1/e. Tax number: ☐☐☐☐☐☐☐☐ ☐ ☐☐

1/f. Trade registry number: ☐☐-☐☐-☐☐☐☐☐☐

1/g. MNB sector code: ☐

2. Securities series data:

2/a. Name: _____

2/b Form of instrument: ☐ physical ☐ dematerialized

2/c Method of issue ☐ public ☐ private

2/d Date of issue (year, month, day): ☐☐☐☐ ☐☐ ☐☐

2/e Currency: ☐☐☐

2/f Face value: ☐☐☐.☐☐☐.☐☐☐.☐☐☐,☐☐☐

2/g Total face value of issued securities series: ☐☐☐.☐☐☐.☐☐☐.☐☐☐,☐☐☐

2/h Maturity: ☐ definite ☐ indefinite

2/i. Maturity date: ☐☐☐☐ ☐☐ ☐☐

2/j. Type:
- ☐ government bond
- ☐ discount Treasury bill
- ☐ Central Bank bond
- ☐ bond with subscription right
- ☐ convertible bond
- ☐ mortgage bond
- ☐ interest bearing treasury bill
- ☐ Treasury bond
- ☐ bond
- ☐ Treasury saving bill
- ☐ certificate of deposit
- ☐ other

Applicant data:

Applicant name: _____

Mailing address, e-mail address, phone number: _____

Please issue the invoice on the ISIN administration fee to the following name:_____

Please send the invoice electronically to the below e-mail address or mail the paper invoice to the following mailing address:

_____

Please send confirmation of the ISIN application to the following e-mail address or mailing address:

_____

Date: _____ _____ (year, month, day)

.....
Applicant signature

[1] Please state the issuer type if none of the issuer types listed applies.