

Administrative ban decision

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Page: 1/1

REGISTRATION SEAL

PROTOCOL NUMBER

INFORMATION ABOUT THE EMPLOYER

Employer's name:

Employer's address:

National identification number:

Tax identification number:

E-mail:

At the employee's irrevocable request _____
to place an administrative ban on his earnings in favor of ALTA bank a.d. Belgrade, to ensure repayment _____ of the credit
we are making the following:

ADMINISTRATIVE BAN DECISION

On earnings _____ (hereinafter: CREDIT RECEIVER) is placed, in
favor of ALTA bank a.d. Belgrade (hereinafter: ALTA bank), administrative ban (hereinafter: Ban) to ensure the repayment of the credit and
interest,

according to the Credit Agreement number _____ from _____ /date/

The amount of the approved credit is _____ RSD (in
with a repayment term of _____ months letters _____)

The monthly annuity on the day of release of the credit in the
credit rate amounts to _____ RSD.

The first annuity is due to be paid _____ /date/ and the others, according to the credit repayment plan

The due annuity is paid in favor of ALTA Bank, account number 908-19001-
11 / _____ (with a reference to the number - lot
of credits)

THE SIGNATORY OF THIS BAN COMMITS TO:

- that if there is an interest rate change for this credit type during its repayment, he is to act in everything according to the notification of ALTA bank,
- that in the further credit repayment, he is to act according to ALTA bank's written notifications about the change of monthly annuities,
- that the ban will not be removed until he receives a written report from ALTA bank that the credit has been paid in full.
- that if the CREDIT RECEIVER's employment relationship with this employer ends, for any reason, ALTA bank will be notified immediately, and the CREDIT RECEIVER's Ban will be transferred to the employer with whom he establishes an employment relationship.

By adopting and submitting this Ban, we commit to fully fulfill all obligations arising from it, in accordance with the applicable regulations

Place and date _____

L.S. _____

Signature of the authorized accounting person

Signature of an authorized person

STATEMENT OF THE CREDIT RECEIVER

With which I irrevocably accept that an administrative ban is placed on my personal earning in the name of the approved credit at ALTA bank a.d. Belgrade

under Credit Agreement number _____ with a monthly annuity of RSD _____ in the next _____ months.

This authorization is valid even if the monthly annuity on the credit exceeds ____ % of my personal monthly earnings that was at the time of approval. The statement remains valid until the final repayment of the total credit debt, and ceases to be valid upon a written report from ALTA bank a.d. Belgrade.

I state under full material and criminal responsibility that, if for any reason the credit installments are not realized through the administrative ban, I will pay the monthly annuities myself until the final repayment of the debt.

Place and date _____

Signature of the credit receiver _____

