III Fina

FINA e-Invoice Web Service Application

1. BUSINESS ENTITY INFORMATION

| <form></form> | Name | | |
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| Contry | Company Number (MB) | | Personal ID No. (OIB) |
| <form></form> | City/town, street address and n | o. | Postal Code |
| <pre>identification number, please designate the service user prior to logon to e-invoice. If one natural person (mic OBI) is the owner of none may no as expanse company number, each or table business due to due to company service. If one ratural business due to due to company service is each or table business due to due to company service. If one ratural business due to due to company service is each or table business due to due to company service. If one ratural business due to due to</pre> | Country | | ISO Country Code ¹ |
| <form></form> | identification number), please d crafts business (each crafts bus company (Personal Identificatio | esignate the service user prior to logon to iness having a separate company number n Number – OIB + Company number - Mi | two natural persons (each natural person having a separate personal o e-Invoice. If one natural person (one OIB) is the owner of more than one er), each crafts business should be registered for e-Invoice separately, as a |
| Please mark with an "X" the method that your company will use to access e-invoice and fill out other information accordingly. Protei application or file upload/download – access using FINA e-card or USB token. Name and Sumane | Business unit information shou wish to grant the rights for more Code refers to the information t e-Invoice | e than one business unit to the user, pleas | se complete a separate application form for each business unit. Business Ur |
| Please enter information on the user of the FINA e-card or USB token. Name and Sumame | | | |
| Name and Sumame Personal ID No. Postal Code Chylowy, street address Postal Code Postal Code Phone Postal Code Postal Code Phone <td></td> <td>•</td> <td>FINA e-card or USB token.</td> | | • | FINA e-card or USB token. |
| Cityltown, street address and no. ² Postal Code Phone | 1 | user of the FINA e-card or USB token. | |
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| E-nail address * Please enter the address of the company where the service user is located. * Please enter the address of the company where the service user is located. * Web Service - access using application and server certificate Application name a ³ | | | Postal Code |
| ² Please enter the address of the company where the service user is located. | Phone | |] |
| <form> Web Service - access using application and server certificate Application name ³ * Application name ³ ³ bacter name (FQDN)³ ³ bacter name (FQDN)³ * Application name and e-mail address should be the same as in the Application Form for the Issuance of Server, Application or VPN Certificates. Blasse mark nor subser rights. The user can be granted rights for more than one unit in the system of the business entity. A separate application form shall be filled out for each business unit. If your company accesses the service via a web service, i.e. using an application and server certificate, the following rights have to be assigned and associated with the certificate' lewing and acceptance, and/or Signature and sending</form> | E-mail address | | |
| Application name ³ Application name ³ Server name (FQDN) ³ ³ Application name and e-mail address should be the same as in the Application Form for the Issuance of Server, Application or VPN Certificates. Blease mark one subser rights. The user can be granted rights for more than one unit in the system of the business entity. A separate application form shall be filled out for each business unit. If your company accesses the service via a web service, i.e. using an application and servicate with the certificate: Viewing and acceptance, and/or Signature and sending dwith the certificate: Viewing and acceptance, and/or Signature and sending dwith the certificate: Viewing and acceptance, and/or Signature and sending dwith the certificate: Viewing and acceptance, and/or Signature and sending dwith the certificate: Viewing and acceptance dwith the certificate dw | ² Please enter the address of th | e company where the service user is loca | ated. |
| ³ Application name and e-mail address should be the same as in the Application Form for the Issuance of Server, Application or VPN Certificates. J Server Certificate , the following rights have to be assigned and associated with the certificate: Viewing and acceptance, and/or Signature and Server certificate, the following rights have to be assigned and associated with the certificate: Viewing and acceptance, and/or Signature and Server certificate, the following rights have to be assigned and associated with the certificate: Viewing and acceptance, and/or Signature and Server certificate, the following rights have to be assigned and associated with the certificate: Viewing and acceptance, and/or Signature and Server certificate, the following rights have to be assigned and associated with the certificate: Viewing and acceptance, and/or Signature and Server certificate. Server, associated with the certificate: Viewing and acceptance, and/or Signature and Server certificate. Server, associated with the certificate: Viewing and acceptance is service via a web service. A server, associated with the certificate: Viewing and acceptance is a server certificate. Server, associated with the certificate: Viewing and acceptance is service via a web service. Signature and server certificate. Server, associated with the certificate: Viewing and acceptance is a web service. Signature and server certificate. Server, associated with the certificate: Viewing and acceptance is a web service. Server, associated with the application form, the user who has been granted the users servite with certificate. Server, associated with the application form, the user who has been granted the Right to access all business units. A separate associated with the power of attorney of the preson authorized to represent the grantor. Information and rights relating to your company should be entered and marked on this application form while the information about the granter and the rights assigned to you be the grantor should be entered | Application name ³ | using application and server certificate | |
| A USER RIGHTS Please mark one or more user rights. The user can be granted rights for more than one unit in the system of the business entity. A separate application form shall be filled out for each business unit. If your company accesses the service via web service, i.e. using an application and sever certificate; the following rights have to be assigned and associated with the certificate: Viewing and acceptance, and/or Signature and Sending, depending on whether you only wish to receive or to send invoices, or both. User rights Entry | | | |
| Signature and sending Sending payment notifications Signature and sending Sending payment notifications Access to all business units ⁴ Rights on behalf of another business entity ⁵ The right of access to all business units should only be marked in combination with one or more other rights. Depending on the combination of rights in the application form, the user who has been granted the Right to access all business units will automatically be granted all the marked rights for all business units of the relevant business entity that have previously been registered for e-Invoice. In that case, there is no need to enter a Business Unit Code. The authorized you to use e-Invoice for its account and on its behalf, please mark the Rights on behalf of another business entity has authorized you to use e-Invoice for the access authorized to represent the grantor. Information and rights relating to your company should be entered and marked on this application form, while the information about the grantor and the rights that will be assigned to you on behalf of the grantor should be entered in a separate power of attorney form. If you wish to use e-Invoice for the grantor of automet of attorney of attorney form. If you wish to use e-Invoice for the power of attorney of attorney of the grantor and the rights that will be assigned to you on behalf of the grantor. The power of attorney form is available for download at www.fina.hr. In accordance with Art. 80. of the Value Added Tax Act and Art.161 of the Ordinance on Value Added Tax, I hereby declare that, by selecting the right or about payment, and by signing this Application Form, I have agreed to receive invoices in an electronic format from all my suppliers through Fina's e-Invoice system. In | 4. USER RIGHTS Please mark one or more user r application form shall be filled o server certificate, the following r | ights. The user can be granted rights for i ut for each business unit. If your company ights have to be assigned and associated | more than one unit in the system of the business entity. A separate y accesses the service via a web service, i.e. using an application and d with the certificate: Viewing and acceptance, and/or Signature and |
| Access to all business units ⁴ Rights on behalf of another business entity ⁵ The right of access to all business units should only be marked in combination with one or more other rights. Depending on the combination of rights in the application form, the user who has been granted the Right to access all business units will automatically be granted all the marked rights for all business units of the relevant business entity that have previously been registered for e-Invoice. In that case, there is no need to enter a Business Unit Code. If another business entity has authorized you to use e-Invoice for its account and on its behalf, please mark the Rights on behalf of another business entity, and submit this Application Form together with the power of attorney of the person authorized to represent the grantor. Information and rights relating to your company should be entered and marked on this application form while the information about the grantor and the rights that will be assigned to you on behalf of the grantor should be entered in a separate power of attorney form. If you wish to use e-Invoice for the grantor only, and not for your own company, please mark only the Rights on behalf of another business entity in this application form and attach the power of attorney of the grantor listing the rights assigned to you by the grantor. The power of attorney form is available for download at www.fina.hr. In accordance with Art. 80. of the Value Added Tax Act and Art.161 of the Ordinance on Value Added Tax, I hereby declare that, by selecting the right Viewing and acceptance, and/or Sending information about payment, and by signing this Application Form, I have agreed to receive invoices in an electronic format from all my suppliers through Fina's e-Invoice esystem. Inon | User rights | Entry | Viewing and acceptance |
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| In another business entity has additioned you to use enhance enhance and on its behalt, prease mark the Rights on behalt of another business entity, and submit this Application Form together with the power of attorney of the person authorized to represent the grantor. Information and rights relating to your company should be entered and marked on this application form while the information about the grantor and the rights that will be assigned to you on behalf of the grantor should be entered in a separate power of attorney form. If you wish to use e-Invoice for the grantor only, and not for your own company, please mark only the Rights on behalf of another business entity in this application form and attach the power of attorney of the grantor listing the rights assigned to you by the grantor. The power of attorney form is available for download at www.fina.hr. In accordance with Art. 80. of the Value Added Tax Act and Art.161 of the Ordinance on Value Added Tax, I hereby declare that, by selecting the right Viewing and acceptance, and/or Sending information about payment, and by signing this Application Form, I have agreed to receive invoices in an electronic format from all my suppliers through Fina's e-Invoice system. In, on | rights in the application form, the rights for all business units of the | he user who has been granted the Right | to access all business units will automatically be granted all the marked |
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| Signature of the service user Name and surname of the authorized representative Signature of the service user Signature of the authorized representative To be filled in by FINA employee Signature of the authorized representative | right Viewing and acceptance, a | and/or Sending information about paymer | nt, and by signing this Application Form, I have agreed to receive invoices |
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| | | | |
| | | ., | Signature Stamp |

III Fina

Information to the respondent about the processing of personal data collected by e-Invoice Web Service Application

Head of Personal Data Processing: Financial Agency (cro. Financijska Agencija – FINA), Ulica grada Vukovara 70, 10 000 Zagreb, OIB: 85821130368, info@fina.hr / info phone 0800 0080

FINA Personal Data Protection officer contact information: dpo@fina.hr

Personal data collected through this e-Invoice Web Service Application are processed only for the purposes of registration and access to FINA elnvoice service and are relevant for the realization of the contract in which the respondent is a party.

The recipient of personal data is FINA. The personal data collected by this e-Invoice Web Service Application are not available to other recipients.

Personal data will be kept for 12 years from the moment of service cancellation or the moment of certificate expiration, together with given service-using rights.

A person to whom personal data are related to, has the right to demand from FINA an access, correction, deletion, transfer and limitation of data processing and to file a complaint against the related personal data processing, assuming that the prescribed conditions are fulfilled.

The request for foregoing rights will be submitted in written form to the designated FINA business units whose list is published on internet adress: www.fina.hr.

The Respondent file an objection to personal data processing to the supervisory entity – Personal Data Protection Agnecy (cro. Agencija za zaštitu osobnih podataka), Selska cesta 136, Zagreb, azop@azop.hr, www.azop.hr