

**APPLICATION FORM SALARY FINANCING UNDER SOVEREIGN GUARANTEE SCHEMA**

Corporate Customers that do not have an existing financing in Raiffeisen Bank Albania

**A – Company Data and demand for the required limit**

NAME OF THE COMPANY	<input type="text"/>
NUIS	<input type="text"/>
ANNUAL TURNOVER IN LEK YEAR 2019	<input type="text"/>
AMOUNT OF FINANCING IN LEK	<input type="text"/>
NET SALARIES FOR EACH MONTH SUBJECT OF FINANCING	Month 1 _____ Amount Lek _____ Month 2 _____ Amount Lek _____ Month 3 _____ Amount Lek _____
FUND FOR THE PAYMENT OF SOCIAL , HEALTH INSURANCE AND PERSONAL INCOME TAX FOR EACH MONTH SUBJECT OF FINANCING	Month 1 _____ Amount Lek _____ Month 2 _____ Amount Lek _____ Month 3 _____ Amount Lek _____
REQUIRED VALIDITY (Not exceeding 31 March 2022)	<input type="text"/>
E-MAIL ADDRESS	<input type="text"/>
PHONE NUMBER	<input type="text"/>

**B – Preliminary data on the impact of Covid 19 on the company's activity**

WHICH OF THE FOLLOWING MEASURES UNDERTAKEN BY THE GOVERNMENT HAS IMPACTED THE ACTIVITY OF YOUR COMPANY:	Choose the applicable measure: <input type="checkbox"/> Restriction of activity schedule <input type="checkbox"/> Restriction of movement for all categories <input type="checkbox"/> Closed activity
THE MAIN INDUSTRY WHERE THE COMPANY OPERATES:	Insert activity description

**C – Purpose of Financing Request**

The request of our company for financing according to the above details is in accordance with Decision No. 277 Date 06.04.2020 of the Council of Ministers. We declare that we are aware that the purpose of using the funds from this financing will be only to pay the salaries of the employees of our company according to the above-mentioned months, based on the payroll processed by RAIFFEISEN BANK in February 2020. We are aware that the value of the financing may vary according to the request submitted by us, but in any case will not exceed the value of 3 gross monthly salaries of employees declared in February 2020. We are aware that in any case the maximum monthly financing value per employee will not be higher than 150,000 ALL.

## D – Credit Bureau Authorization

Upon signing this application form, hereby declare that all the information given herein is complete and accurate. Having realized that demographic and financial data stored in the Credit Registry of the Bank of Albania will be handled in accordance with legal provisions corresponding to protection of personal data, banking and professional secret and also having realized that Raiffeisen Bank sh.a and Credit Registry of the Bank of Albania have taken all necessary measures to ensure the safe handling of the data above:

Authorize Raiffeisen Bank sh.a, for purposes that include:

1. assessing the application to obtain credit
2. credit risk assessment throughout the duration of credit contractual relationship with the Bank and/or
3. assessment of borrower's credibility

to be informed of our obligations towards banks/ branches of foreign banks/ credit institutions, through authorized use of data/information to the credit registry, in order to assess the amount of financial obligations, warranties and reliability/ability to repay financial obligations. Also we give our consent to the bank (Raiffeisen Bank sh.a.), to use our name and identifying details and its financial data held at the credit registry to perform standard and mandatory reporting to the Credit Register of the Bank of Albania."

**Legal Representative:** \_\_\_\_\_ (Name/Last name/Signature)

**Address:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

## E – Mandatory Documents Required by the bank in order to start the review of the Application

### ALONG WITH THIS APPLICATION FORM WE ARE ATTACHING IN THE E-MAIL THE FOLLOWING DOCUMENTS

- Historical Extract of Commerce Register of the last month, issued by NCB, downloaded from e-albania
- Financial statements of year 2018 deposited in NCB
- Audit report (if eligible for audit)
- 2019 Yearly Profit Tax Return Sheet (Form for Declaration and payment of Profit Tax 19 – A), downloaded from E-Tax Albania
- Real time obligations toward tax office downloaded from E-Tax
- Payroll in excel format processed in RBAL on February 2020 where we can find the details on gross salary, social, health insurance and Personal Income Tax (contribution of employee and employer) and also the net salary
- VAT Return Sheet for March 2019 and March 2020, downloaded from E-Tax Albania
- Fill in the Declaration - Environmental Social Impact of the activity of your company (Annex 1)
- Fill in the Financial Data in the attached table (Annex 2)

## F – Declarations and Commitments

We are aware that the bank will consider the applications for financing of borrowers on the basis of the principle "first come, first served", without discriminating against any of the Borrowers. Our application will be considered complete and qualified for review with the completion of all fields and attachment of all required documentation. We declare that we are aware that in case of incapacity on our part to submit all documentation required by the bank at this moment, the application will not be qualified by the bank to respect the principle "first come, first served".

We declare that we are aware that the submission of this application form and accompanying documents by e-mail to the address: [Korporate@raiffeisen.al](mailto:Korporate@raiffeisen.al) of your Bank does not constitute any commitment on the part of your bank to approve this request for financing. We are aware that our application will be considered by your bank at the time this application form along with the accompanying documentation is submitted in full. We are also aware that granting of this financing by Raiffeisen Bank Sha is subject to fulfillment of all the conditions of Decision No. 277 Date 06.04.2020 of the Council of Ministers, where in addition to the criteria set according to this decision your bank will review the repayment ability of our company as well as will receive the necessary approvals for the granting of this financing in full compliance with the internal conditions and policies applied by you. We are fully aware that the review, approval and disbursement of this financing by your Bank will depend on our availability for submitting all necessary documentation, in addition to the one attached to this application form, to conclude the process of analysis, signing of financing contracts and disbursement of funds in accordance with the financing purpose.

**Legal Representative:** \_\_\_\_\_ (Name/Last name/Signature)

**Address:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**ANNEX 1 - ASSESSMENT OF THE ENVIRONMENTAL AND SOCIAL IMPACT**

Please fill in the table below in relation to the Environmental and Social activity of your company

The company possess all Permits and Licences that are necessary for the purpose of performing its activities in accordance to the national legal requirements concerning Environment, Health and Work Safety.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
If your Company has the Environmental Permit, please determine the last date of Selfmonitoring Report for Environmental Impact Assessment  (If Yes Please Specify the date of the Report): _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Company to Specify whether Injuries and fatalities have occurred during activity performance  (If Yes Please Specify the date of the Report): _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Has the Company received any Environmental incidents and fines from Inspectorates.  (If Yes Please Specify the date of the Report): _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Did the local citizens or a NGO express their concern or disapproval because of the influence of activity of your company to the environment?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Is there any other aspect of the activity that could create a risk or have any impact on the environment or on the citizens, or which could be considered a disturbance during ordinary operations or under special circumstances?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Only food Industry - Determine the last date of Hygiene – Sanitation Certification  Specify: _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Specify whether the company is equipped with a fire protection system and performs annual fire extinguisher testing.  If yes specify the date: _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>

**Legal Representative:** \_\_\_\_\_ **(Name/Last name/Signature)**
**Address:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

## ANNEX 2 - REQUIRED FINANCIAL INFORMATION

## 1. Data on 3 main Suppliers of your Company

No.	Name of the Supplier	In % of Annual Purchases
1		
2		
3		

## 2. Data on 3 main Clients of your Company

No.	Name of the Client	In % of Annual Sales
1		
2		
3		

## 3. Specify % of payables which are older than 90 days

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## 4. Specify % of receivables which are older than 90 days

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## 5. Specify the current number of employees of your Company

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## 6. Ownership of Business Premises

Yes  No 

Legal Representative:

Address:

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*(Name/Last name/Signature)*

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Date