



Rijksoverheid

APPLICATION FOR PAYMENT OF DEPOSITED FUNDS

APPLICANT'S DETAILS

① Particulars:

(COMPANY) NAME

STREET NUMBER (+ suffix)

POSTCODE + PLACE

COUNTRY

E-MAIL ADDRESS

Chamber of Commerce / Commercial Register

Registration number *

Name authorized representative *

* If applicable

② Please check the appropriate box + fill in the required information if C. applies:

A. You are a

Private individual

B. The applicant is a

Proprietorship

Legal entity

Please submit proof of power of attorney or a similar document, such as a certificate of incumbency, or an extract from the commercial register (no older than 3 months) which reveals that you are entitled to represent the legal entity

C. You are a legal professional at

_____ [name office]

③ You are submitting this application

On behalf of yourself or your business or on behalf of your company

By proxy on behalf of someone else or someone's business or a company

In case you are acting by proxy on behalf of someone else or someone else's business or a company, please fill in the details below of the relevant person of the company for whom or which you are submitting this application:

Particulars of the principal:

(COMPANY) NAME

STREET NUMBER (+ suffix)

POSTCODE + PLACE

COUNTRY

E-MAIL ADDRESS

Chamber of Commerce / Commercial Register

Registration number *

Contact person's name *

* If applicable



DETAILS CONSIGNMENT OF DEPOSITED FUNDS

4 Please fill in the details of the consignment:

Please check our search engine for further details:

<https://www.rijksoverheid.nl/onderwerpen/consignatiekas/zoeken-naar-een-uitkering-uit-de-consignatiekas>

NUMMER [number] _____

OMSCHRIJVING [description] _____

NAAM BELANGHEBBENDE [rightful claimant] _____

BEDRAG BELANGHEBBENDE [amount due] Less than € 50 € 50 - 200 More than € 200
 € _____ [in case you know the exact amount]

NAAM AANMELDER [name of the registerer] _____

VOLGNUMMER [serial number] _____

THE RIGHTFUL CLAIMANT

5 According to the search engine:

Please check the appropriate box + fill in the required information if D. applies:

- A.** You/your company/your principal are/is registered as the rightful claimant under your own **naam** [name] Yes No
- B.** You/your company/your principal are/is registered as the rightful claimant as **erfgenaam/erfgenamen van** [heirs to] Yes No
- C.** You/your company/your principal are/is registered as the rightful claimant as **onbekende**¹ [unknown] Yes No
- D.** You/your company/your principal are/is **not registered** as the rightful claimant, but you make a claim for the funds because of: _____

SUPPORTING DOCUMENTS

6 Please check the appropriate box (5A-5B-5C-5D) + send the specified documents with the application:

- If 5A applies:**
 • **Send documents**
- Copy of a valid legal identification of the applicant² (or of the authorized representative or of the principal)
- Copy of a document which proves that the registerer of the consignment owed you/your company/your principal money, UNLESS the full name of the rightful claimant is listed in the search engine + its identity is established
- If 5B applies:**
 • **Send documents**
- Copy of a valid legal identification of the applicant² (or of the authorized representative or of the principal)
- Copy of the *verklaring van erfrecht* [certificate of inheritance]
- If 5C applies:**
 • **Send documents**
- Copy of a valid legal identification of the applicant² (or of the authorized representative or of the principal)
- Copy of a document which proves that the registerer of the consignment owed you/your company/your principal money
- If 5D applies:**
 • **Send documents**
- Copy of a valid legal identification of the applicant² (or of the authorized representative or of the principal)
- Copy of a document which proves that you/your company/your principal are/is entitled to (a part of) the deposited funds

¹ E.g. *onbekende aandeelhouder* [unknown shareholder]

² Please send a copy of a valid legal identification. You may obscure your photo and social security number, if so desired. For identification we require a passport or an ID-card or a driver's license.



PRINCIPAL

7 Please check the appropriate box (5A-5B-5C-5D) + send the specified documents with the application:

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> In case you are submitting the application by proxy on behalf of the person entitled to the funds
• Send documents | <input type="checkbox"/> Copy of the power of attorney
<input type="checkbox"/> Copy of a valid legal identification of the principal ² |
| <input type="checkbox"/> In case you are submitting the application by proxy on behalf of the company entitled to the funds
• Send documents | <input type="checkbox"/> Copy of the power of attorney
<input type="checkbox"/> Copy of a recent extract from the commercial register document which reveals that the signatory of the power of attorney is entitled to represent the relevant legal entity |

PAYMENT

- 8 Your request is for a payment of € _____
- 9 To be transferred to:
- **IBAN**
- _____
- For payment outside the SEPA area:
- **IBAN or bank account number**
 - **BIC/SWIFT ***
 - **Routing/transit number/ABA code of the bank ****
- _____
- _____
- _____
- * To find your BIC number: <https://nl.ibancalculator.com>
** For payments to North America (USA and Canada)
- 10 In case the account is not in the applicant's name, please state the name + the address of the account holder
- _____
- _____
- _____

FOR FURTHER CREDIT

A payment 'for further credit' is a transfer of money from an intermediary bank to the bank account of the ultimate beneficiary. This may be the situation in the case of a non-SEPA payment, i.e. any payment outside Europe. The processor is the intermediary bank to which the compensation is transferred.

PLEASE ENTER YOUR DETAILS, IF APPLICABLE:

PROCESSOR

Name of bank _____

BIC/SWIFT * _____

Routing/transit number/ABA code ** _____

Country _____

Postcode _____

Street number _____

Street number suffix _____

Street _____

Place _____

Confirmation of consent for payment via FFC * Yes No

You are required to give your consent for payment via For Further Credit.

Confirm your consent that the payment to the bank is deemed to constitute payment to the beneficiary. Yes No

Confirm your consent that the payment to the bank is deemed to constitute payment to the beneficiary.



Rijksoverheid

OPTIONAL EXPLANATION

If so desired, you can give an explanation to your application below:

SIGNATURE

Date: _____

Name: _____

*Signator applicant
(or the authorized representative (by proxy))*