



WELCOME PACK FREELANCERS/SELF-EMPLOYED PROFESSIONS

Welcome to POST Luxembourg!

Thank you for your interest in our simple and accessible bank packages, designed to support your business throughout all your projects.

Benefit from numerous advantages with POST Finance:

- A simplified price list, with transparent, straightforward offers and no hidden charges
 - Ebanking transfers
 - Card payments
 - Cash withdrawals at ATM
- FREE of charge, all banks, all countries!**
- Our dedicated teams are available for advice and support, by phone from 7am to 8pm, Monday to Saturday, or via our points of sale.

YOUR ACCOUNT IN 3 STEPS !

We will guide you through the process of opening an account, following the **3 steps** described below.

For your understanding, you will also find more detailed explanations in the section "DEFINITIONS AND ADDITIONAL EXPLANATIONS".

#Tip for processing your application as quickly as possible:

Provide all the requested information and explain as extensively as possible your activity, your professional plans, your previous career path, etc.

Questions?

Give us a call!

8002 8004 from 7am to 8pm, Monday to Saturday

Write us!

contactpro.finance@post.lu

1

FILL IN THE FORMS

2

ENCLOSE DOCUMENTS

3

SUBMIT YOUR REQUEST

OUR BUSINESS PACKAGES



PRO pack

A basic solution that meets your daily needs

€20⁰⁰ /month

INCLUDED IN THIS PACKAGE

- ✓ Current account
- ✓ eboo eBanking access
- ✓ Raiffeisen and Spuerkess account visibility
- ✓ LuxTrust Mobile
- ✓ Production of a RIB (account details slip)
- ✓ Creation of standing orders
- ✓ Free Online Transfer
- ✓ Visa Debit included



PRO+ pack

An advanced solution for your specific financial management and multi-banking needs

€30⁰⁰ /month

INCLUDED IN THIS PACKAGE

- ✓ Current account
- ✓ MultiLine eBanking access
- ✓ Multi-banking management
- ✓ SEPA direct debit
- ✓ LuxTrust Smart Card Pro secure connection
- ✓ Direct debits
- ✓ Multiple account statement formats
- ✓ Free Online Transfer
- ✓ SEPA Direct Debit
- ✓ Visa Debit included

1 FILL IN THE FORMS

Enclosed forms

- ☐ Identification of your entity
- ☐ Identification of the legal representatives
- ☐ Choice of Package and additional services
- ☐ Conditions and signatures
- ☐ Identification of the beneficial owners
- ☐ Signature form

Forms available on our website www.post.lu/finance-documentation or at our points of sale

- ☐ FATCA CRS form for individuals (*mandatory*)
- ☐ MultiLine form (*only for the PRO+ package*)
- ☐ Request for an additional account (*optional*)
- ☐ Request for card(s) – Business customers (*optional*)

2 ENCLOSE DOCUMENTS

Further explanations on the documents to be enclosed can be found in the chapter "DEFINITIONS AND ADDITIONAL EXPLANATIONS" on pages 3-4 of this document.

Freelancers:

Company documents	
☐	Extract from the RCS (less than 6 month old)
☐	Authorization of establishment
☐	Account statements from the last 3 months (see question 10 on page 6)
☐	Commercial lease contract
☐	Supplier invoices (see question 4 on page 6)
☐	Customer invoices (see question 5 on page 6)
Identification documents of the legal representatives / mandated / beneficial owners / cardholder	
☐	Copy of both sides of an identity document that is still valid and legible
☐	Proof of residence (e.g. residence certificate) less than 3 months old
☐	Resume (Curriculum Vitae)

Self-employed professions:

Company documents	
☐	Authorization of establishment / Approval or certificate of professional capacity
☐	Account statements from the last 3 months (see question 10 on page 6)
☐	Commercial lease contract
☐	Supplier invoices (see question 4 on page 6)
☐	Customer invoices (see question 5 on page 6)
Identification documents of the legal representatives / mandated / beneficial owners / cardholder	
☐	Copy of both sides of an identity document that is still valid and legible
☐	Proof of residence (e.g. residence certificate) less than 3 months old

3 SUBMIT YOUR REQUEST

Visit one of our points of sale to hand in the documents.



DEFINITIONS AND ADDITIONAL EXPLANATIONS

This guide will help you understand and correctly fill in the forms and supporting documents, so that your application can be processed faster.

Definitions

Activity sector	The category or general nature of the entity's main activity. (Example: food processing, mechanical engineering, legal, health, etc.)
Beneficial owner	An individual who controls the entity and/or holds at least 25% of its shares.
Trade name and commercial sign	Name under which the company operates and is declared in the register of beneficial owners
Funds	Funds correspond to a sum of money
Holder of a public office	An individual who holds or has been entrusted with an important public function (e.g. mayor, minister, etc.).
Legal representative	Person authorised to act on behalf of the entity and take legal decisions on its behalf.
MultiLine	Multi-bank eBanking solution for business customers, enabling them to manage accounts of multiple banks
NACE code	The code designates the classification of companies by economic activity in the European Community and is generally found on your extract from the RCS. This code is established by STATEC using a questionnaire completed by the entity. The condition for obtaining it is the registration at the RCS. The official document can be added to the application to open an account.
Nature of business	Description of the type of operations or services offered by the entity. (Example: sales, services, ...)
RCS No.	The RCS (Registre du Commerce et des Sociétés) number is the unique identifier assigned to each entity when it is registered at the RCS. This number is used to identify an entity officially and legally. Registration at the RCS is carried out at the Luxembourg Business Registers (LBR) www.lbr.lu.
VAT identification number LU	Individual identification number linked to value added tax (VAT). To obtain this number, an initial declaration must be submitted to the "Administration de l'enregistrement des domaines et de la TVA".

Explanations on the forms and supporting documents

Approval or certificate of professional capacity	Document issued by a competent authority certifying that a natural person has the necessary skills to carry out his or her professional activity.
Authorization of establishment	This is the authorization issued by the authorities allowing a company or individual to carry out business activity in the area specified in the document. This document is issued by the Ministry of the Economy or by the competent administration depending on the field of activity. The application for an establishment authorization must be submitted online via MyGuichet.lu and will be available to download from the same platform.
Extract from the RCS	The extract from the RCS is an extract from the register of commerce and companies (Registre de commerce et des sociétés) which summarises the essential information concerning registered companies. Registration at the RCS is carried out at the Luxembourg Business Registers (LBR) www.lbr.lu .
FATCA/CRS form	In the context of the Foreign Account Tax Compliance Act FATCA (intergovernmental agreement signed between Luxembourg and the United States) and the "Common Reporting Standard (CRS)" (global standard for the automatic exchange of information relating to financial accounts in tax matters), which are part of the fight against tax fraud and evasion, this form is used to collect customers' tax data in compliance with their legal obligations.
Identification of the beneficial owner	Form enabling the identification of persons who controls the entity and/or holds at least 25% of its shares.
Signature form	Form used to collect signatures from individuals authorized to carry out transactions on the account in question.

IDENTIFICATION OF YOUR ENTITY

Legal name: _____ Commercial sign: _____

Former company name (if applicable) : _____

Date of constitution: _____ City/country of constitution: _____

RCS No. (if applicable): _____ VAT identification No. LU : _____
(if applicable, for a turnover exceeding €35,000)

NACE code: _____ Nature of business: _____

Number of employees: _____ Phone: _____ Email : _____

Website (if applicable): _____

Head office address: Street: _____ Number: _____

Postal code: _____ City: _____ Country: _____

Postal address: ☐ Same as head office address or ☐ Other address (fill in below)

Street: _____ Number: _____

Postal code: _____ City: _____ Country: _____

The questions below help us to better understand your company, the nature of its business and its long-term objectives.

1. Describe your business model:

An overview of your current and future activities, your products and/or services....

2. What was the reason for the creation of your entity?

Do you have any previous training or professional experience in this field of activity (if so, with which company, please specify)?

3. From what sources/activities and which countries do the funds invested in the entity at the time of its creation come?

What is the source of your funds or assets (property you own). Please also indicate the amount.

4. Who are your main suppliers?

In which countries are they based? What countries do the goods come from? Please provide us with some invoices from these suppliers

5. What type of customer do you have or are you targeting?

Business or private customers, in which sector of activity, in which countries, one-off or regular customers, ... Please provide us with some invoices from these customers How do you intend to sell your services or products? For example, through one of your shops, a website, intermediaries or resellers, etc

6. What advertising do you use?

What are your marketing means and via which channels (website, social networks, brochures, etc.)?

7. What is your estimated annual turnover?

The estimated total amount of your sales of products and/or services over one year.

8. Which income do you expect over the first few years, from which countries and via which channels (bank transfers, card payments or cash)?

Specify the frequency and average amount of the deposits. Example: provision of services, fees, etc. (please send us paper proof of these funds)

9. What outflow of money do you expect over the first few years, to which country and through which channel (bank transfer or cash)?

Specify the frequency and average amount of expenses. Example: Payments to suppliers, rent, salaries, etc...

10. What is the motivation for opening an account with POST Finance?

If applicable, the reason for the change of bank account (in this case, please provide us with bank statements from the last 3 months).

11. What will be the main purpose of this account?

Specify whether the account is used for operational expenses, salaries, supplier payments, income from sales, provision of services, etc ...

IDENTIFICATION OF THE LEGAL REPRESENTATIVES

This section helps us to collect information about your company’s legal representatives, i.e. people authorised to act on behalf of the company and take legal decisions on its behalf.

Legal representative	1	2
Last name(s)		
First name(s)		
Date and place of birth		
Nationality		
Home address - street, n°		
City, country		
Phone		
Business sector		
Name of the employer		
Email		
Holder of a public office	☐ yes* ☐ no	☐ yes* ☐ no
* If yes: Function :		
Institution :		
Start date :		
End date :		

CHOICE OF PACKAGES AND ADDITIONNEL SERVICES

PACKAGE

select the relevant package: ☐ PRO ☐ PRO +

The monthly fees for the package and possible options will be debited from

☐ this account ☐ the POST account number _____

ONLINE BANKING (EBOO / MULTILINE)

EBOO

Only for the PRO package

1. Legal representative

Do you have a LuxTrust device? ☐ Yes ☐ No

Phone: _____

Email : _____

2. Legal representative

Do you have a LuxTrust device? ☐ Yes ☐ No

Phone: _____

Email : _____

MULTILINE

Only for the PRO+ package

Please enclose the «MultiLine form» available on our website www.post.lu/finance-documentation.

If you do not have a professional LUXTRUST device, you will need to order one via www.luxtrust.lu, before continuing with the activation of the Multiline contract.

CARDS



1 Visa Debit card included in your PRO and PRO+ package

Name on the card: _____

Is the cardholder one of the legal representatives :

☐ Yes

☐ Legal representative 1

☐ Legal representative 2

☐ No (if no, please fill in the information below)

Last name(s): _____ First name(s): _____

Date of birth: _____ City: _____ Country: _____

Nationality(s): _____

Identity document/passport number: _____ Issued on: _____ From: _____

Address: Street: _____ Number : _____

Postal Code: _____ City: _____ Country: _____

Phone: _____ Email : _____

Position within the company: _____

For any other additional card, please enclose the «Card application form – Business Customer» available on our website.

www.post.lu/finance-documentation

- Additional Visa Debit +4€/month
- Visa +5€/month
- Visa Gold +7€/month

ADDITIONAL ACCOUNT

For an additional account for €3 per account per month, please attach the «Request for an additional account» form available on our website www.post.lu/finance-documentation

PAPER ACCOUNT STATEMENTS

By default, the account statements are available free of charge via your EBOO/MultiLine access.

Optional paper statements at an additional cost (2€/statement)

☐ Daily

☐ Weekly

☐ Bi-monthly

☐ Monthly

☐ Additional monthly statements

The optional paper statements will be sent to the following postal address:

☐ Same as postal address on page 5 or ☐ Other address (fill in below)

Street: _____ Number: _____

Postal code: _____ City: _____ Country: _____

CONDITIONS AND SIGNATURES

Account holder

The signatory(ies) below

- declare(s) to have read, understood and accepted in full the information on this form, the general and special terms and conditions for POST Finance professional customers and the Personal Data Notice. These documents are available at www.post.lu, at any point of sale and on eboo ebanking.
- authorize(s) the «company» to enter into a business relationship with POST Luxembourg and to open the bank account.

Representative 1	Representative 2
Date: _____	Date: _____
Name(s) and signature: _____	Name(s) and signature: _____

Cardholder of the Visa Debit card included in the package

The signatory declares that, as the future holder of the requested card (subject to its acceptance), he/she has read and accepted in full the information on this form, the general and special terms and conditions for POST Finance professional customers, and the Personal Data Notice. These documents are available at www.post.lu and at any POST point of sale.

Date: _____
Name(s) and signature _____

For POST Finance use only

Autocollant guichet

Signature : _____

Personal data :

POST acts in its capacity as data controller and can be contacted directly via its customer service department: 8002 8004.

You can also contact POST's DPO (Data Protection Officer) at :

POST Luxembourg - DPO, 38 place de la gare, L-1616 Luxembourg (or by email at: privacy@post.lu)

Insofar as POST processes your personal data, you have the following rights at all times and within the limits set by law: to access your personal data, to ask for it to be corrected if it is inaccurate or incomplete, to be deleted if it is obsolete, to oppose its processing for a legitimate reason (in particular for commercial prospecting purposes), to ask to receive a copy of the personal data you have provided in a structured format (portability), to ask for the processing of your data to be restricted or their permanent deletion (right to be forgotten), ask not to be the subject of a decision based exclusively on automated processing, including profiling, or withdraw your consent.

To exercise any of these rights, you may notify your request to POST, free of charge and accompanied by a copy of your identity document, via one of the contact points above.

You may also address your complaints to the «Commission Nationale pour la Protection des Données» (CNPD), via their website: www.cnpd.lu

For further information, you can consult POST's General Terms and Conditions, Personal Data Notice and Data Protection Policy at <https://www.post.lu/particuliers/infos-aide/protection-des-donnees..>

POST Luxembourg

Adresse postale : POST Finance L-2997 Luxembourg / Tél. 8002 8004 ou +352 2424 8004 / contactpro.finance@post.lu
Bureaux et Siège : 38, place de la Gare L-1616 Luxembourg / RCS Luxembourg : J28 / TVA : LU 15400030

www.post.lu


N° compte : **L U** **1 1 1 1** **0 0 0 0**

Account holder - Name: _____

The amended law of 12 November 2004 on the fight against money laundering and terrorist financing makes it compulsory to identify the beneficial owner of any account. The beneficial owner is the physical person who controls the entity and/or holds at least 25% of its shares.

Beneficial owner	1	2
Last name(s)		
First name(s)		
Date and place of birth		
Nationality		
Home address - street, n°		
City, country		
Profession/sector of activity/ employer		
Holder of a public office	☐ yes* ☐ no	☐ yes* ☐ no
* if yes : Function:		
Institution:		
Start date:		
End date:		

Beneficial owner	3	4
Last name(s)		
First name(s)		
Date and place of birth		
Nationality		
Home address - street, n°		
City, country		
Profession/sector of activity/ employer		
Holder of a public office	☐ yes* ☐ no	☐ yes* ☐ no
* if yes : Function:		
Institution:		
Start date:		
End date:		

The assets deposited in the account originate from: _____

The account will be used for the following purpose:

☐ Current expenses

☐ Others: _____

The signatory agrees to inform POST Finance in writing and without delay of any change in the foregoing declarations and certifies that this declaration is accurate.

Place and date: _____

Legal representative 1

Legal representative 2

Legal representative 3

Legal representative 4

Name

Name

Name

Name

Signature

Signature

Signature

Signature

Beneficial owner 1

Beneficial owner 2

Beneficial owner 3

Beneficial owner 4

Name

Name

Name

Name

Signature

Signature

Signature

Signature

Documents to be joined to this form (for each signatory):

- Copy of both sides of an identity document that is still valid and legible
- Proof of residence (e.g. residence certificate) issued less than 3 months old

For POST Finance use only

Autocollant guichet

Signature

This information is mandatory for the management of your account and associated payment methods. In accordance with the law, you have the right to access, modify and delete any data concerning you, as well as the right to object to the processing of such data on legitimate grounds. For further information, please consult the Data Protection Policy in the Terms and Conditions. www.post.lu

L	U			1	1	1	1									0	0	0	0
---	---	--	--	---	---	---	---	--	--	--	--	--	--	--	--	---	---	---	---

Account holder – Name: _____

Signatures:
*(Persons authorised to carry out transactions on the above account)**

Mandated	1	2
Legal representative	☐ yes ☐ no	☐ yes ☐ no
Last name(s)		
First name(s)		
Date and place of birth		
Nationality		
Home address: street, n°, city, country	_____ _____	_____ _____
Position within the company		
Profession/sector of activity/ employer <i>(if not employed by account holder)</i>		
Signature	_____	_____

Mandated	3	4
Legal representative	☐ yes ☐ no	☐ yes ☐ no
Last name(s)		
First name(s)		
Date and place of birth		
Nationality		
Home address: street, n°, city, country	_____ _____	_____ _____
Position within the company		
Profession/sector of activity/ employer <i>(if not employed by account holder)</i>		
Signature	_____	_____

We, the undersigned legal representatives of the account holder, hereby authorize the above signatories to operate the account in question opened with POST Luxembourg.

Place and date: _____

Legal representative 1

Legal representative 2

Legal representative 3

Legal representative 4

Name

Name

Name

Name

Signature

Signature

Signature

Signature

Documents to be joined to this form (for each signatory):

- Copy of both sides of an identity document that is still valid and legible
- Proof of residence (e.g. residence certificate) issued less than 3 months

For POST Finance use only

Autocollant guichet

Signature

Important notes:

- In the event of changes concerning the mandated persons or their powers, the persons authorized to represent the entity must inform POST Finance immediately by registered letter. POST Finance cannot be held liable for the consequences of any changes not notified to them.
- Any new signature form cancels the previous form. Therefore, for previous signatures to remain applicable, all signatures on the form must be renewed.
- This form is preserved by POST Finance. The signatures on this form are only valid for transactions with POST Finance.

**This information is mandatory for the management of your account and associated payment methods. In accordance with the law, you have the right to access, modify and delete any data concerning you, as well as the right to object to the processing of such data on legitimate grounds. For further information, please consult the Data Protection Policy in the Terms and Conditions. www.post.lu*

ADDITIONAL SOLUTIONS FROM POST LUXEMBOURG

You are a new company or simply looking for new telecommunications and mail solutions? Discover POST Luxembourg's other services and let us know what you are interested in. We will take care of forwarding your contact data to our colleagues, experts in these fields.



POST Telecom

Are you setting up your business or is it less than 24 months old?

Which IT and telecom tools and solutions should you choose?

GREAT DEAL: If you're setting up your own business, stock up on discounts!

Mobile Packages

- 3 months free BusinessEurope package

Internet offers

- 3 months free subscription

More infos at [Business creation - POST](#)



or at **8002 4000**



POST Courier

Does your company regularly send mail or parcels?
Take advantage of our mail and parcel processing services, our counter network and our logistics solutions!

-  Delivery and collection of mail and parcels
-  Various franking and labelling options
-  Payment by monthly invoice

More infos at www.post.lu/en/business



or at **2424 6080**

Are you interested in our products and services and would you like some personalized advice?

Go to our online contact form or simply fill in the information below to enable us to contact you by phone or email.

I am interested in

- ☐ POST Telecom offers
☐ POST Courier offers

Last name and first name: _____

Phone: _____

Email: _____

Message: _____

CONFIRMATION OF YOUR ACCOUNT APPLICATION

POST Finance confirms receipt of your 'Welcome Pack' application for opening a professional bank account.

To be filled out by the customer

Name of the entity: _____

Name of the depositor: _____

Signature: _____

For POST Finance use only

Autocollant guichet :

Signature: _____

We will get back to you as soon as possible to complete your file if necessary, or to confirm the activation of your eboo pack.

Questions about the status of your request?

Call us! 8002 8004 from 7 AM to 8 PM, Monday to Saturday

Write us! contactpro.finance@post.lu

Need financing for your company?

Microlux offers **microloans of up to €50 000** and free support (individual coaching, training, promotion) for entrepreneurs with no access to traditional bank credit.



Get in touch with Microlux today!

@ info@microlux.lu

☎ +352 45 68 68 76

🌐 www.microlux.lu