philoro
SAFE DEPOSIT BOX

philoro
VIEL GOLD. VIEL ZUKUNFT.

APPLICATION FOR THE RENTAL OF A SAFE DEPOSIT BOX

Status: February 2025

1. CLIENT (RENTER)

Contracting party

Contract number (assigned by philoro)

☐ Individual ☐ Company

Title

Last name

First name

Company name

Commercial register

Date of birth

Nationality

Street, building number

ZIP

City

Phone*

E-Mail*

☐ Identity card no. ☐ Passport no. ☐ Driver`s license no.

Issuing authority

valid until

* Providing either a phone number or an email address is mandatory for contact purposes.

2. LOCATION/RENTAL OBJECT

philoro provides a safe deposit box for the above-mentioned client in accordance with the enclosed German Civil Code (BGB). The safe deposit box is located in the Korneuburg branch.

Safe deposit box no. ☐ Safe deposit box size

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3. FEES/INSURANCE VOLUMES

The annual fee for the basic fee and any additional insurance will be calculated on a pro-rata basis from the contract start date for the current calendar year. The fees can be found in the price list at https://philoro.at/service/schliessfach.

Basic fee

Basic insurance amount: € Annual fee: €

Supplementary insurance

The coverage amount can be adjusted at any time. The total sum of the basic insurance and the increased coverage may not exceed €500,000. The fee for increasing the coverage is €9.90 per €5,000 increase in the coverage amount per year.

Supplementary insurance amount: € Annual fee: €

4. PAYMENT METHOD

Account holder (must be the client):

Bank

IBAN BIC

DIRECT DEBIT AUTHORISATION: I agree that philoro EDELMETALLE GmbH will debit the safe deposit box fee and any processing fees from my above-mentioned bank account until further notice. I authorize philoro EDELMETALLE GmbH to collect payments from my account by SEPA direct debit. At the same time, I instruct my bank to honor the SEPA direct debit drawn by philoro EDELMETALLE GmbH on my account. I can request a refund of the charged amount within 8 weeks, starting from the debit date. The terms agreed with my bank apply in this case.

5. NEWSLETTER/ADVERTISING

☐ Yes, I want/we want to subscribe to the philoro newsletter. You may revoke your consent at any time.

☐ Yes, I/we agree that philoro may use my/our data for advertising purposes. My/our data will not be passed on to third parties. I may revoke my consent at any time.

REVOCATION: You are welcome to send your revocation to the email address schliessfach@philoro.com or by mail to philoro EDELMETALLE GmbH, Businesspark 2, 2100 Korneuburg. Further information on data protection can be found in the attached ‚Privacy Policy in accordance with Art. 12 ff. General Data Protection Regulation (GDPR)`.

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6. DECLARATIONS OF CONSENT (PLEASE CHECK)

- ☐ I/We acknowledge receipt of the BGB, the copy of this application and the price list.*
- ☐ No verbal side agreements exist.*
- ☐ I/We declare that I am/we are the beneficial owner(s) myself/ourselves.*
- ☐ I/We declare that neither I/we nor any person strongly associated with me/us is a politically exposed person.
- ☐ I/We hereby confirm that I/we have read and acknowledged the ‚Privacy Policy in accordance with Art. 12 et seq. of the General Data Protection Regulation (GDPR)`.*

Fields marked with an asterisk (*) must be completed..

7. SIGNATURES

By signing, I declare my consent to enter into a contract for a safe deposit box and simultaneously agree to the collection and processing of my personal data. This consent also includes the necessary processing of special categories of personal data under Art. 9 (2) GDPR: For the initial setup of customer access, the biometric fingerprint is encrypted and stored as a code on the access card (Crypto Memory Card) via a reading device – this card remains in the customer`s possession. When accessing the safe deposit facility, the customer's fingerprint is scanned at a terminal and compared with the stored data on the card. The fingerprint is not stored outside the access card.

City	Date	Signature Customer

8. KEY HANDOVER

☐ Number of access cards ☐ Number of keys

The Renter must store all keys and access cards for the rental object securely and is liable for all costs – especially for a new lock, including installation costs, opening, etc. – that arise due to the transfer, loss, or theft of a key and/or access card.

By signing, I confirm that I have received the stated number of keys and/or access cards.

City	Date	Signature Customer

Contract received by

Field to be filled out by philoro.

Last name	First name

City	Date	Signature/Stamp philoro Employee Incl. key and access card handover