

# TARGET2 form for collection of Static Data – Form for Dedicated Cash Account (DCP) –

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|         |                         |                       |                        |              |
|---------|-------------------------|-----------------------|------------------------|--------------|
| A,B     | <b>BIC:</b>             |                       | <b>PARENT BIC:</b>     |              |
| C,D,E   | <b>New</b>              | <b>Modify</b>         |                        | <b>Close</b> |
| F,G,H,I | <b>Production</b>       | <b>Pre-Production</b> | <b>Community</b>       | <b>Date:</b> |
| J,K     | <b>Ref:</b>             |                       | <b>rel. Ref:</b>       |              |
| L,M     | <b>Activation date:</b> |                       | <b>Responsible CB:</b> |              |

|    | 1. DCA  | Relevant GUI Screen                                       |
|----|---|---|
| 11 | DCA number:   | <i>New Dedicated Cash Account</i>                         |
| 12 | Cash account type:  |   |
| 13 | Floor Notification Amount:  |   |
| 14 | Ceiling Notification Amount:  |   |
| 15 | External RTGS account number:   |   |
| 16 | Optional Cash Sweep:                      Yes                      No | <i>New Standing/Pred efined liquidity transfer orders</i> |



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| New  | Modify      | Close            |
|------|-------------|------------------|
| BIC: | PARENT BIC: | Activation date: |

### 2. Credit Memorandum Balance

|    |  |                               |
|----|--|-------------------------------|
| 21 | Primary CMB:   | New Credit Memorandum Balance |
| 22 | Authorized BIC Rules<br><br>BICs: Inclusion                |                               |
| 23 | Receiving Securities Account Number (only in pledge case): |                               |



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| New  | Modify      | Close            |
|------|-------------|------------------|
| BIC: | PARENT BIC: | Activation date: |

|         |  |  |    |                  |
|---------|--|--|----|------------------|
| 24a, b  | Central Bank Auto-collateralisation:                                     | Yes  | No | <i>New Limit</i> |
| 24c     | Requested auto-collateralisation limit:                                  |  |    |                  |
| 25 a    | PM account for automatic auto-collateralisation reimbursement            |  |    | <i>n.a.</i>      |
|         | PM account BIC:  |  |    |                  |
| 25b     | PM account holder MFI code:  |  |    |                  |
| 26 a, b | Securities accounts for collateral supply<br>(securities account number) | CSD participant identification<br>(Parent BIC/CSD participant BIC) |    | <i>n.a.</i>      |

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|             |                    |                         |
|-------------|--------------------|-------------------------|
| <b>New</b>  | <b>Modify</b>      | <b>Close</b>            |
| <b>BIC:</b> | <b>PARENT BIC:</b> | <b>Activation date:</b> |

| 3. Secured Group             |   |                              |  |                          |
|------------------------------|---|------------------------------|--|--------------------------|
| 31                           | <p>Request for Inclusion on a Secured group</p> <table><tr><td>Secured group Identification</td><td>Identification of the party responsible for the secured group<br/>(Parent BIC/Payment Bank BIC)</td></tr></table> | Secured group Identification | Identification of the party responsible for the secured group<br>(Parent BIC/Payment Bank BIC) | <i>New secured group</i> |
| Secured group Identification | Identification of the party responsible for the secured group<br>(Parent BIC/Payment Bank BIC)  |                              |  |                          |

Both parties confirm that they have agreed on the link between the mentioned PM account and the DCA.

The Undersigned declare(s) to have the full capacity and authority to execute the TARGET2 form for and on behalf of the Participant requesting activation of the registration.

PM account holder:

(Holder of the PM account indicated in field 15 – *External RTGS account number*)

\_\_\_\_\_  
Date, Name(s) Signature(s)

DCA holder:

\_\_\_\_\_  
Date, Name(s) Signature(s)