



Ministry of Finance

State Asset Management Department

Registry Office for Security Interests in Moveable Property

Lao, Peoples Democratic Republic

“Registry Office”

FINANCIAL AGREEMENT

This Financial Agreement must be completed in duplicate, signed by the Client, attached to the Client Application Form and delivered to the Ministry of Finance, State Asset Management Department, Registry Office. Upon acceptance of the Client Application form and the Financial Agreement and Terms and Conditions, the Registry Office staff will process the application according to the Regulations and set up the Client Account. Once accepted by the State Asset Management Department, Registry Office (Registry Office), it shall constitute an agreement between the Client and the Registry Office (database) to draw payments periodically in accordance with the provisions of the said agreements as described therein and agreed to by:

Client Name: (please print)

Name of Company: _____

Authorized Person: _____

Title of Authorized Person: _____

Phone Number of Authorized Person: _____

Email of Authorized Person: _____

Address Information: (please print)

P.O. Box: _____

Street Name: _____

City: _____ District: _____

Province: _____ Country: _____

Phone: _____ Fax: _____

Web Site Address: _____



ຫ້ອງການຈົດທະບຽນຄຳປະກັນດ້ວຍສິ່ງທາລິມະຊັບ ກົມຄຸ້ມຄອງຊັບສິນຂອງລັດ ກະຊວງການເງິນ.

ໂທລະສັບ/ແຟັກ: (856-21) 900905. ອີເມລ໌: reg_simp@mof.gov.la. ເວບໄຊຕ໌: www.mof.gov.la/str

Registry Office for Security Interests in Moveable Property. State Assets Management Department, Ministry of Finance.

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Ministry of Finance, State Asset Management Department, Registry Office is authorized to draw on the Client's bank account specified below for the purpose of establishing and maintaining a Minimum Balance in the Client Account for the Client's use of the Registry Office service (database) and for the amounts, if any, of any credit card administration fees, NSF, or other bank charges incurred as a result of Registry's access to the Client's bank account.

Debits will be processed by the Registry Office in paper, electronic or other form and may vary in dollar amount. This Financial Agreement shall commence upon its execution and delivery by the Client to Registry Office and debits may be processed from time to time. Although the Registry Office will provide on-line statements summarizing account transactions to the Client, such debits authorized by this Financial Agreement shall not be contingent upon receipt of such statements by the Client.

The Client acknowledges that the authorization provided by the Financial Agreement will remain in full force and effect until ten (10) days following receipt by Registry Office of advance written notice of its revocation. This authorization may be canceled at any time upon delivery of written notice as described above.

The Client agrees not to request or arrange the return of payments made under this Financial Agreement for any reason whatsoever with the exception of either: (i) debits made more than ten (10) days following receipt of written notification by the Registry Office of revocation of this Financial Agreement; (ii) debits from the incorrect account or (iii) incorrect debits

The Client shall notify the Registry Office of any incorrect charge resulting from any failed use of the Registry service within thirty (30) days of such charge being incurred.

The Client hereby represents and warrants that all persons whose signatures are required to sign the Client's bank account have signed this Financial Agreement below, that all persons executing this Financial Agreement on behalf of the Client are duly authorized signing officers and are empowered to enter into such an arrangement and that, upon execution and delivery, this Financial Agreement will constitute a valid obligation binding upon and enforceable against the Client in accordance with its terms.

Initial Deposit (300,000.00 LAK minimum) amount (to be completed by Client)

Initial Deposit _____ LAK

Low Balance Alert

You will be alerted that your balance is down to 60,000.00 LAK unless you specify a different amount.

Low Balance Alert preference _____ LAK



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Payment Preference (Please check one in each column and complete the appropriate corresponding Payment Plan Options below.)

Payment Preference	Initial Deposit	Subsequent Payments
1. Electronic Funds Transfer		
2. Electronic Cheque		
3. Cheque or Money Order		
4. Credit Card		
5. Direct Deposit		

Payment Plan Options

Option 1: Electronic Funds Transfer Option

If the Electronic Funds Transfer option has been selected the following information is required.

Maximum transfer amount _____ LAK

Minimum balance amount _____ LAK

Top up Account to a maximum of _____ LAK

COMPLETE THE FOLLOWING INFORMATION AND INCLUDE A VOIDED CHEQUE.

Financial Institution Name _____

Financial Institution Address: _____

Institution Number _____ Branch Number _____

Account Number _____

Signature of Authorized Person _____



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Option 2: Electronic Cheque Option

If the Electronic Funds Transfer option has been selected the following information is required.

Maximum transfer amount _____ LAK

Minimum balance amount _____ LAK

Top up Account to a maximum of _____ LAK

COMPLETE THE FOLLOWING INFORMATION AND INCLUDE A VOIDED CHEQUE.

Financial Institution Name _____

Financial Institution Address: _____

Institution Number _____ Branch Number _____

Account Number _____

Signature of Authorized Person _____

Option 3: Cheque or Money Order

If Cheque or Money Order option has been selected, forward cheque or money order payable to Ministry of Finance, Office of the Security Interests in Moveable Property to the address as shown below:

Option 4: Credit Card

If Credit Card option has been selected the following information is required. Please note that if the Credit Card Option has been selected as your payment preference, any credit card administration fees will be applied against your account.

Credit Card _____ Visa _____ Master Card _____

(Min amount 90,000.00LAK)

Credit Card Number _____ Exp Date _____

Name on Credit Card _____

Cardholder's Signature _____



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Option 5: Direct Deposit

If Direct Deposit option has been selected for subsequent top up of your account, the Registry Office will contact you regarding the process required to send deposits directly to the Registry Office Financial Institution.

Agree to on behalf of the Client

Authorized Signature:

Authorized Signature:

(Signature)

(Signature)

(Title)

(Title)

(Date)

(Date)

Accepted by:

Office for Security Interests in Moveable Property

(Signature of Registrar)

(Date)

The information provided by the Client in these Agreements may be used by the Registry Office solely for the purpose for which it is provided. The Registry Office shall not otherwise disclose the information to any other party or use it for any other purpose.

Sign where indicated and forward in duplicate to the address shown below.



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