Trg hrvatskih velikana 3, 10000 Zagreb

Tel.: 01 4564 515 • Fax: 01 4610 549 [www.hnb.hr](http://www.hnb.hr/)

APPLICATION FOR THE ANALYSIS AND REPLACEMENT OF STAINED EURO BANKNOTES

In person: By post:

HRVATSKA NARODNA BANKA HRVATSKA NARODNA BANKA

Trg hrvatskih velikana 3, Zagreb Trg hrvatskih velikana 3, p.p. 859, 10002 Zagreb

Tel.: 01 4564 515 Sektor za gotov novac

Info: [www.hnb.hr](http://www.hnb.hr/)

APPLICANT’S PERSONAL DATA:

|  |  |  |  |
| --- | --- | --- | --- |
| Name and surname or name of institution/company:  Click or touch here to enter text. | | | |
| Street and house number:  Click or touch here to enter text. | | | |
| Post office:  Click or touch here to enter text. | Place, municipality/city:  Click or touch here to enter text. | | Country:  Click or touch here to enter text. |
| Date of birth:  Click or touch here to enter text. | Phone:  Click or touch here to enter text. | Mobile phone:  Click or touch here to enter text. | E-mail:  Click or touch here to enter text. |
| Identity document, ID number (for the amounts of EUR 10,000.00 and more, a copy of the document and a copy of the documentation on the origin of euro banknotes must be enclosed):  Click or touch here to enter text. | | | |

SPECIFICATION OF STAINED EURO BANKNOTES:

|  |  |  |
| --- | --- | --- |
| DENOMINATION (EUR) | **QUANTITY (pcs)** | **VALUE** |
| 500 | Click or touch here to enter text. | Click or touch here to enter text. |
| 200 | Click or touch here to enter text. | Click or touch here to enter text. |
| 100 | Click or touch here to enter text. | Click or touch here to enter text. |
| 50 | Click or touch here to enter text. | Click or touch here to enter text. |
| 20 | Click or touch here to enter text. | Click or touch here to enter text. |
| 10 | Click or touch here to enter text. | Click or touch here to enter text. |
| 5 | Click or touch here to enter text. | Click or touch here to enter text. |
| TOTAL VALUE: | | Click or touch here to enter text. |

STAINED EURO BANKNOTES ARE:

a) personal property  b) property of: Click or touch here to enter text.

WHAT CAUSED THE STAINING?

Click or touch here to enter text.

WERE EURO BANKNOTES STAINED BY THE ELECTROCHEMICAL PROTECTION DEVICE?

NO  YES Click or touch here to enter text.

*The kind and type of the device with electrochemical protection must be indicated.*

DOES THE INK POSE A THREAT TO HUMAN HEALTH?

NO  YES Click or touch here to enter text.

*The ink security and technical sheet must be enclosed.*

ATTACHMENT(S):

Click or touch here to enter text.

*Confirmation of the competent institution on the event that has caused the damage.*

I PREFER TO RECEIVE FUNDS IN EXCHANGE FOR CASH PRESENTED FOR REPLACEMENT:

BY PAYMENT TO THE ACCOUNT

IBAN – International Bank Account Number:

Click or touch here to enter text.

BIC (Business Identifier Code):

Click or touch here to enter text.

Bank name and head office:

Click or touch here to enter text.

Account owner (only if different from the Applicant):

Click or touch here to enter text

AT THE CNB CASH DESK

NOTE:

Click or touch here to enter text.

By signing this Application, the Applicant confirms that all the data in the Application are true.

Date: Applicant's signature:

Click or touch here to enter text.

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TO BE COMPLETED BY THE CNB – CURRENCY AREA

Date of receipt: Process. reg. No.:

Receipt at the CNB cash desk NOTE(S):

Other

Payment to the account

Temporarily retained for analysis

Not replaced

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|  |

Received by:

INSTRUCTIONS FOR THE COMPLETION OF THE APPLICATION FOR THE ANALYSIS AND REPLACEMENT OF STAINED EURO BANKNOTES

All the data requested in the form should be entered in the APPLICATION FOR ANALYSIS AND REPLACEMENT OF STAINED EURO BANKNOTES.

Data on the Applicant for natural persons:

* Applicant’s name and surname
* residence address (street, house number, post office, place, municipality/city)
* country (if the Applicant is not a citizen of the Republic of Croatia)
* date of birth
* phone, mobile phone, e-mail
* identity document – ID name and number (for the amounts of EUR 10,000.00 and more, a copy of the identity document and a copy of the documentation on the origin of euro banknotes must be enclosed).

Data on the Applicant for institutions/companies:

* name of institution/company
* institution/company head office address (street, house number, post office, place, municipality/city)
* country (if the Applicant is not a citizen of the Republic of Croatia)
* phone, mobile phone, e-mail
* identity document of the bearer – ID name and number (for the amounts of EUR 10,000.00 and more, a copy of the identity document and a copy of the documentation on the origin of euro banknotes must be enclosed)
* power of attorney of the person authorised for representation of the institution/company for the bearer (owner of the identity document).

Specification of stained euro banknotes: Specify the denomination submitted for analysis, the number of pieces and the total value. Stained banknotes that are glued or damaged so that they cannot be specified do not need to be separated and listed.

Stained euro banknotes are: Tick whether stained banknotes are personal property of the Applicant or of the institution (provide data).

What caused the staining? Describe in detail what caused the staining. If euro banknotes were stained by an electrochemical protection device, specify in detail when and how it happened and who is responsible for the staining.

Were the euro banknotes stained by the electrochemical protection device? If YES, indicate the type of the device (container for the transfer/transport of cash, anti-theft device or some of the other forms of electrochemical protection) and the type of the device (device name).

Does the ink pose a threat to human health? If YES, the packaging must contain a warning that the ink poses a threat to human health. The security and technical sheet on the ink should be enclosed as information on ink properties.

Attachment(s):

A copy of the confirmation of the competent institution on the event that caused the damage.

A copy of the identity document and a copy of the documentation on the origin of euro banknotes for the amounts of EUR 10,000.00 and more.

Manner of receipt of funds: If the receipt of funds by payment to the account is selected, the data on the account must be entered. The Applicant takes the responsibility for the accuracy of the entered data.

Note(s): Exceptionally, if the Applicant is not able to receive payment to the account or approach the CNB cash desk personally, it should be entered in the field “Note(s)”.

Date: Date of completion of the Application.

Signature: Handwritten signature of the Applicant.

We hereby notify you that the Croatian National Bank will process all personal data collected in this form exclusively to address your application, i.e. for the purpose of the analysis and replacement of stained euro banknotes and in connection with Article 3 of the Decision of the European Central Bank of 19 April 2013 on the denominations, specifications, reproduction, exchange and withdrawal of euro banknotes (recast) (ECB/ 2013/10) and pursuant to Article 37 of the Act on the Introduction of the Euro as the Official Currency in the Republic of Croatia (Official Gazette 57/2022 and 88/2022) and Articles 15 and 18 of the Decision on the control of authenticity and fitness checking of euro cash (Official Gazette 134/2022).

Please note that the provision of requested personal data is necessary in order to enable the Croatian National Bank to address your application. As a result, if the requested personal data are not provided, the Croatian National Bank might not be able to address the application.

The Croatian National Bank shall process your personal data in the application in accordance with the specified purposes, for a period during which the processing of such data is necessary to achieve the purpose for which the data were collected, and no longer than the period specified in the internal bylaw governing the processing and protection of the archival and registration material of the Croatian National Bank.

Your personal data may be forwarded to the Ministry of the Interior of the Republic of Croatia in accordance with applicable regulations. In the case of providing your personal data to third parties, the Croatian National Bank will inform you about it in advance in accordance with applicable regulations on the protection of personal data.

We hereby notify you that you have the right of access to your personal data, which means that you have the right, at your request, to receive a confirmation on whether the Croatian National Bank processes personal data that relate to you and if it does, that you have the right to be informed, in particular about the purpose of the processing, the categories of personal data being processed, the recipients or the categories of recipients to whom personal data have been or will be disclosed, on the foreseen period during which personal data will be stored and on the rights you as data subject may exercise in relation to the Croatian National Bank as the controller of the processing of personal data, for instance, the right of rectification of personal data that relate to you. The forms prepared in order to facilitate the exercise of these rights may be downloaded from the Croatian National Bank website (link: https://[www.hnb.hr/en/protection-of-personal-data).](https://www.hnb.hr/en/protection-of-personal-data))

For any questions and information regarding the exercise of your rights to the protection of personal data that are contained in this application, please contact the Croatian National Bank personal data protection officer at the following e-mail address: [sluzbenik.osobni@hnb.hr.](mailto:sluzbenik.osobni@hnb.hr)