

SIF BANAT-CRIŞANA General Meeting of Shareholders convened for April 20 (21) 2017

LIST OF DOCUMENTS FOR THE APPLICATION FILE

1	Nomination for administrator office ¹
2	Curriculum vitae in Europass format, dated and signed; and where applicable, it is mentioned the supervisory authority for entities in which the person has activated;
3	Copy of the identity document, certified as true copy by the handwritten signature of the holder of the ID;
4	Copies of education degree documents and other relevant certificates held;
5	The questionnaire in the Annex 1 of ASF Regulation no.1 4 / 2015 completed and signed by the person being evaluated [Annex 1 below];
6	Affidavit, showing that he/she complies with the applicable legal requirements relating to the work that is going to perform, that he/she is not in incompatibility under the laws in force and that, where there is a such a situation, acknowledges to discontinue the situation, within 30 days from the date of his/her endorsement by ASF, submitting at the deadline the documents attesting the end of incompatibility [Annex 2 below];
7	Criminal record certificate and fiscal record certificate within the legal validity term or other equivalent document issued by competent authorities in the country where he/she has established domicile and / or residence; for persons who are resident in Romania for more than three years and submit the fiscal and criminal record or other equivalent document issued by the competent authorities of the last country where he/she had previously established domicile / residence;
8	Affidavit of the person evaluated on the incidents recorded in the last 10 years, that could affect his/her reputation and integrity [Annex 3 below]
9	Statement on the quality of independent administrator [Annex 4 below]

¹ pursuant to the provisions of Art. 137^1 of Law no. 31/1990, candidates for administrators' office may be nominated by current members of the Board of Directors (administrators) or by shareholders. If the nomination is made by a shareholder, he/she must provide proof of shareholder's quality, consisting of a statement issued by Depozitarul Central or an intermediary (SSIF).

Annex 1

QUESTIONNAIRE

for the members of the management structure and persons holding key functions within regulated entities

No.	Subject/Question	Ans	wer	er Explanations					
		YES	NO	1					
1	Regulated entity			Na	ame	Re	egistered office	Т	ype of entity
2	Identity of the candidate (Foreign			Surname and	d first name				
	persons shall also add the date as of			CND					
	which they shall have / had their domicile/residence in Romania.)			CNP					
	domenc/residence in Normania.)			Series and nu	umber of the id	entity car	rd .		
					ate of issuance	criticy car	۵,		
				Date and pla	ce of birth				
				Citizenship					
				Danaiaila ana	1/				
				Domicile and/or residence					
3	Function proposed			Description of	of the duties an	d resnon	sihilitias		
	(For persons with managerial duties,			Description	or the duties an	и гезроп.	310111111123		
	add the list of activities to be								
	coordinated.)								
4	Vocational training and								
	relevant experience								
5	Shareholder or associate in the last 10			1. Individual	holdings ¹				
٦	years			1. IIIdividuai	rioluligs				
	, , ea. 5			Name and ac	tivity of the en	tity	Participation sha	are (%)	
					,		•	. ,	
							مملم طفاني	a limbra 2	
			2. Holdings together with other persons involved or with close li					e iinks -	
				Name and ac	ame and activity of the entity Participation share (%)				
6	Administration or managerial			Name and					
	responsibilities in the last 10 years other			activity of	Function	Perio	d Respons	ibilities	Results
	than those indicated in the CV			the entity					
7	Business relationships with the				I	1	l		<u> </u>
	regulated entity								
							T		
8	Assessments carried out in the last 10			Name of the	authority		Result of the a		
	years by other authorities of Romania or another state						(supported by	docume	ents)
	another State								
l			İ	ĺ					

9	Conflicts with financial-banking supervisory authorities of Romania or other states, refusal of approval or		Provide details:							
	sanctions of the financial-banking supervisory authorities of Romania or other states, in the last 10 years									
			1. Type of sanctio	n and p	eriod of time	e necessary t	o regai	n reliability		
10	Sanctions imposed as a result of professional, disciplinary, administrative or judicial enquiry, investigation or		Sanctioning authority		nctioned deed	Sanction		Date of sanction		
	procedure in the last 10 years in Romania or another state (Information shall be also provided although reliability has been regained.)									
f	Details of disciplinary sanctions in a function or position as director,		Object of sanction		Sand	tion	Date of sanction			
	fiduciary relation or similar relation - dismissal or cessation/revocation of mandate									
12	Major financial difficulties, financial	Please provide the aspects supplied as follows:								
	deadlocks, enforcement procedures, judicial									
	proceedings pending settlement or settled									
13	Do you have, or intend to acquire in the next 12 months, any holding in									
	the capital of the regulated									
14	entity referred to in Point 1? Are you in any manner whatsoever									
	financially indebted to the regulated									
	entity, including to the entities of the same group, to its shareholders,									
	directors or members of the									
	management structure - details, including the issuance of collateral,									
	mortgage or other financially									
1 -	measured instruments									
15	Please communicate any additional information which may be deemed									
	relevant to assess your									
	qualification, professional									
	experience and good repute									

¹ Provide the holdings accounting for at least 1% of the voting rights; in the case of the companies admitted to trading, provide the holdings accounting for at least 5% of the voting rights.

² Idem Point 1.

I, the undersigned	in awareness of the
provisions of Art. 326 of the Criminal Code regarding false statements, her	eby declare under my owr
responsibility that all answers are correct, complete and true to the real	ality, that I meet the lega
requirements for the	there are no other relevan
facts of which ASF should be informed. I also undertake to inform ASF	of all modifications of the
information provided.	
Signature	Date

NOTE: ASF shall keep the confidentiality of the information comprised herein, unless otherwise provided by law.

AFFIDAVIT

, the undersigned, with domicile n									
- comply with the legal provisions concerning the activity that I am going to perform as a member of the Board of Directors of SIF Banat-Crișana SA and									
- I am not in any situation of incompatibility provided by the laws in force; (if the person is in a situation of incompatibility this is replaced by): I acknowledge to discontinue the situation of incompatibility, within 30 days from the date of the endorsement's by ASF communication, and to submit at the deadline the documents attesting the end of incompatibility									
Given and signed today, on my own responsibility, acknowledging that false statements are punishable by law.									
Signature									
Date									

¹ To be filled with BI for "buletin de identitate" or IC for "identity card" or PAS for passport, in cars of foreign natural persons.

AFFIDAVIT

I, the undersigned	holder of ID $^{\rm 1}$ series .	no
CNP as cand the Board of Directors of SIF Banat-Crișana SA, hereby de	idate for the position of me	mber of the in
$\hfill\Box$ there were no incidents that could affect my reputation and	integrity	
$\hfill\Box$ occurred the following incidents that could affect my reputat	ion and integrity:	
Given and signed today, on my own responsibility, acknowly law.	wledging that false statemer	nts are punishable
Signature		
Date		

¹ To be filled with BI for "buletin de identitate" or IC for "identity card" or PAS for passport, in cars of foreign natural persons.

AFFIDAVIT

place of	bolder of ID	document	city	, COUI	nty	, domicile/pers	sonal a	aares
	, noider of ID	CNP	(Personal	, series Lidentificatio	, 110 on code)	, issued by	h	OI nereby
declare	that:	, CIVI	(i ci sonai	raciiiiiaa	on code) _		, •	icici
□Inot	meet the crite	ria provided	by art. 1	38 ^ 2 of La	w 31/1990	on the quality of	indepe	nden
admini	strator , name	ly*:						
							YES	NO
a)	I am not an o					company and		
b)	l was not an have had su					d company or years;		
c)	I do not rece company ad correspondi	ditional ren	nuneratio	n or advanta	ages, other			
d)	I am not sigr	nificant shar	eholder c	of the Comp	any;			
e)	company or shareholder	with a cont , administra n a relations	rolled con itor, execu ship with	npany, eithe utive directo the compan	er personal or or emplo y, if by the	ships with the ly or as a partner, yee of a company ir substantially		
f)	I am not or h employee of controlled co	the curren	•	-		litor or associated ny or of a		
g)	I am director			in which a	director of	the company is		
h)	I was not the mandates;	company's	non-exe	cutive admii	nistrator fo	r more than 3		
i)	I do not have mentioned i	-		nip with a pe	erson in on	e of the categories		
Signatu	ure					Date		

^{*} mark an X in the box YES if the statement is true or mark an X in the box NO if the statement is not true