

APPROVED by
Resolution of
the Supervisory Board of JSC NSPC
(National System of Payment Cards)
(minutes No. 13 dated 1 October, 2015)

MIR PAYMENT SYSTEM

REGULATIONS

APPENDIX 2

DOCUMENT FORMS

The official language of the Mir Payment System Regulations (Version 1.0, Moscow 2015) is Russian and in case of any discrepancies between the original Regulations and the English version of the Regulations, the Russian version prevails.

Version 1.0

Moscow. 2015

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Application form for acceding to the Mir Payment System Regulations (Form 1)

organisation's letterhead

APPLICATION FOR ACCEDING TO THE MIR PAYMENT SYSTEM REGULATIONS

(city) _____ 201 _____

_____ (full name of organisation acceding to Mir Payment System Regulations)

represented by

_____ (authorised person's title and name)

acting under _____,

(ground for authorised person's powers)

hereby accedes, pursuant to Art. 428 of the RF Civil Code and Part 7, Art. 20 of Federal Law On the National Payment System No. 161-FZ dated 27.06.2011, to the Mir Payment System Regulations as:

Direct Participant	
<input type="checkbox"/> Type A	Issue, Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Issue, Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring
Indirect Participant under the sponsorship of	
_____ (organisation's full name and Sponsor's individual code)	
<input type="checkbox"/> Type A	Issue, Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Issue, Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring
System Participant	
<input type="checkbox"/> Type A	Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring
Participant in the System Participant's payment system	
<input type="checkbox"/> Type A	Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring

Additional information:

Contact information:

telephone No.: _____ fax No.: _____

MIR Payment System

e-mail address: _____

Appendices: (list of documents attached for consideration, with regard to Appendix 1 and Appendix 2, including an inventory of all documents).

(title)

(signature)

(printed name of authorised
person of organisation, acceding to
MIR Payment System Regulations)

Stamp here

Sponsor's approval block

(city) _____ (year) _____

(full name of entity acting as Sponsor for organisation acceding to Mir Payment System Regulations)

hereby notifies and confirms to the Mir Payment System Operator that it is the Sponsor for the Indirect Participant

(full name of organisation acceding to Mir Payment System Regulations)

in the Mir Payment System by virtue of _____
(indicate document details).

(full name of entity acting as Sponsor for organisation acceding to Mir Payment System Regulations)

and guarantees the Mir Payment System Operator that the Indirect Participant will comply with the Mir Payment System Regulations.

(title)

(signature)

(printed name of authorised
person of Sponsor)

Stamp here

System Participant's approval block:

(city) _____ (year) _____

(full name of System Participant organisation)

hereby notifies and confirms to the Mir Payment System Operator that

(full name of organisation participating in System Participant's payment system)

is a participant in _____
(name of System Participant's payment system).

and guarantees the Mir Payment System Operator that this Participant will comply with the Mir Payment System Regulations.

(title)

(signature)

(printed name of authorised
person of System Participant)

Stamp here

**Appendix 1
To Application for acceding
to the Mir Payment System Regulations (Form 1)**

**PROFILE OF THE ORGANISATION ACCEDING
TO MIR PAYMENT SYSTEM REGULATIONS**

1. General information on the organisation acceding to Mir Payment System Regulations

	Parameters	Information
1.1	Organisation's full name (as per the Articles of Association)	
1.2	Organisation's abbreviated name	
1.3	Registered address	<postcode>, <region>, <district>, <locality>, <street>, <house No.>
1.4	Postal address	<postcode>, <region>, <district>, <locality>, <street>, <house No.>
1.5	INN (TIN)	
1.6	KPP (Tax Registration Reason Code)	
1.7	OGRN (Primary State Registration Number)	
1.8	OKPO (Russian National Classifier of Businesses and Organisations)	
1.9	OKATO (Russian National Classifier of Political Subdivisions)	
1.10	OKVED (Russian National Classifier of Economic Activities)	
1.11	Organisation's official website	
1.12	Manager's title	
1.13	Manager's full name	
1.14	<ul style="list-style-type: none"> • Information on the licence for banking transactions • Information on the Payment System Operator Registration Certificate (for System Participants) 	
1.15	Constituent entities of the Russian Federation, where the organisation operates	

2. Banking details of the organisation acceding to Mir Payment System Regulations

	Parameters	Details
2.1	For Direct Participant	
	Correspondent account at the Bank of Russia (specify the data on the Bank of Russia's branch where a correspondent account was opened)	
	BIC	
2.2	For System Participants, indicate information on a System Participant's payment processing centre	
	Name of the payment processing centre	
	Information on the licence for banking transactions	
	BIC	
	Correspondent account at the Bank of Russia Specify the data on the Bank of Russia's branch where a correspondent account was opened	

3. Contact persons of the organisation acceding to Mir Payment System Regulations

No.	Division	Title	Full name	Telephone No.	Fax No.	e-mail
5.1	Supervising manager					
5.2	Organisational (general) issues					

I HEREBY CONFIRM THE RELIABILITY OF INDICATED INFORMATION AND THE CURRENT CONSENT OF CONTACT PERSONS TO HAVING THEIR PERSONAL DATA PROCESSED

_____ (title) _____ (signature) _____ (printed name)

Stamp here

**Appendix 2
To Application for acceding
to the Mir Payment System Regulations (Form 1)**

List of documents to be furnished by an organisation acceding to Mir Payment System Regulations

1. Copy of the Certificate of Incorporation.
2. Copy of the Tax Authority Registration Certificate
3. Copies of Bank Transaction Licences
When changing the licence, a Participant must, within fifteen (15) working days from receiving a new licence (licences), provide a copy (copies) of the new licence (licences) to the Operator.
4. Copy of the Payment System Operator Registration Certificate (for System Participants)
5. Copy of the Articles of Association, copies of registered amendments and alterations thereto as well as copies of certificates of making entries in the Unified State Register of Legal Entities (USRLE) and/or copies of Alterations Entry Sheets of the Unified State Register of Legal Entities.
When altering/amending the Articles of Association or adopting a revised version thereof, a Participant must, within fifteen (15) days from the alterations registration date, provide the Operator with copies of the above documents and those of certificates of making entries in the Unified State Register of Legal Entities (USRLE) and/or copies of Alterations Entry Sheets of the Unified State Register of Legal Entities.
6. Copy of the notice from the Statistical Register of Economic Entities;
7. Copy of the extract from the Unified State Register of Legal Entities (with a limitation period of no more than thirty (30) days from the date of issue by an authorised body);
8. Copies of financial statements for the last three reporting dates (on forms OKUD 0409806, 0409807, 0409808, 0409814).
Financial statements should be provided by a Participant on a recurring basis at the Operator's request.
9. Specimen signatures of persons signing and/or authenticating documents furnished to the Operator or a copy of a card with specimen signatures and seal impression, with specimen signatures of persons signing and/or authenticating documents furnished to the Operator, and the impression of the seal of the organisation acceding to the Mir Payment System Regulations.
10. Copies of documents certifying the election and appointment of a Participant's Sole Executive Body.
When electing a Participant's new Sole Executive Body and extending the authority of the person appointed as the Participant's new Sole Executive Body, the Participant must provide the Operator with a copy of supporting documents within fifteen (15) days from the date of the relevant decision made by the authorised body.
11. Copies of documents needed to define the term of authority of a Participant's Sole Executive Body;
12. Copy of the document confirming the authority of the person signing an application and other documents on behalf of the organisation acceding to the Mir Payment System

Regulations (for example, minutes, resolution, order on appointment of a manager, power of attorney for a signatory etc.);

13. Copies of documents certifying the powers of persons whom the organisation acceding to the Mir Payment System Regulations has authorised to work with symmetric cryptokeys and electronic documents in which information is protected by data encryption tools, and to collaborate with JSC NSPC's certification centre;
14. Copies of orders on hiring the persons whom the Participant has authorised to work with symmetric cryptokeys and electronic documents in which information is protected by data encryption tools, and to collaborate with JSC NSPC's certification centre;
15. Document certifying that a Participant complies with the information protection requirements set out in the Mir Payment System Regulations and Standards.

An organisation acceding to the Mir Payment System Regulations provides documents to the Operator in hard copies certified by the signature of the sole executive body of the organisation acceding to the Mir Payment System Regulations or by that of the substituting person (providing the original or a duly certified copy of the document confirming the authority), such copies to be affixed with the impression of the seal of the organisation acceding to the Mir Payment System Regulations.

Specimen signatures of persons signing and/or authenticating documents must be furnished to the Operator in hard copies certified by the signature of the sole executive body of the organisation acceding to the Mir Payment System Regulations or by that of the substituting person (providing the original or a duly certified copy of the document confirming the authority), such copies to be affixed with the impression of the seal of the organisation acceding to the Mir Payment System Regulations.

The Operator may also ask for other documents by making a request to the organisation acceding to the Mir Payment System Regulations.

**Notice form for assigning the individual code
to a Participant (Form 2)**

**NOTICE OF ACCEDING TO THE REGULATIONS AND ASSIGNING THE
PARTICIPANT'S INDIVIDUAL CODE**

Moscow _____, 20____

Attn:

(Participant's name, authorised person's title and name)

Destination:

(Participant's registered address)

Dear _____

We hereby notify

(specify the Participant's name)

of acceding to the Mir Payment System Regulations as

(specify the type of participation)

and inform you that, under the Mir Payment System Regulations, you have been assigned
the **Participant's individual code** _____.

(specify the assigned code).

authorised person's title

JSC NSPC

Stamp here

signature

Full name

Notice form for assigning bank identification numbers to a Participant (Form 3)

NOTICE OF ASSIGNING BANK IDENTIFICATION NUMBERS

Moscow _____, 20____

Attn: _____
(Participant's name, authorised person's title and name)

Destination: _____
(Participant's registered address)

Dear _____

We hereby notify that, under the Mir Payment System Regulations,

(specify Participant's name)

has been assigned **bank identification numbers** (BIN):

1. for the purpose of Issuance:

No.	Card product name	BIN
1.		
2.		
...		

2. for the purpose of Acquiring:

No.	Acquiring type	BIN
1.		
2.		
...		

JSC NSPC authorised person's title

signature

Full name

Stamp here

Application form for assignment of bank identification numbers (Form 4)

to be printed on letterhead

**REQUEST FOR ASSIGNMENT OF
BANK IDENTIFICATION NUMBERS (BIN)**

(city) _____, 20____

(Participant's full name)

represented by _____
(Participant's authorised person's title and name)

acting under _____
(ground for authorised person's powers)

Participant's Individual code _____

1. We ask you to provide bank identification numbers (BIN)¹

1.1. Issue of Mir Payment System card products

BIN for Mir PS product		Type		Card number length (from 16 to 19 digits)
<input type="checkbox"/>	Debit	<input type="checkbox"/>	Embossed	
		<input type="checkbox"/>	Impersonal	
<input type="checkbox"/>	Prepaid	<input type="checkbox"/>	Embossed	
		<input type="checkbox"/>	Impersonal	
<input type="checkbox"/>	Classical Debit with overdraft			
<input type="checkbox"/>	Classical Credit			
<input type="checkbox"/>	Premium Debit with overdraft			
<input type="checkbox"/>	Premium Credit			

Participant's forecast performance

Performance	unit		
	1st year	2nd year	3rd year
Issuing volumes (unit), including:			
BIN 1			
BIN 2			
BIN n			
Planned turnover (thous. RUB), including:			
BIN 1			
BIN 2			
BIN n			

¹ - to be filled in by a Direct or Indirect Participant.

Key characteristics of the issuance project in terms of products:

- key users (payroll projects, state projects, insurance programmes, welfare payments, gift cards etc.):

- implementation regions (constituent entities of the Russian Federation):

- marketing strategy (advertising, sales channels, interaction with authorities):

- additional information:

1.2. Acquiring ²:

	Merchant acquiring	ATM acquiring	Internet acquiring	Payment kiosks	Cash advance at CAOs	Other (specify)
BIN 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BIN 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BIN 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BIN 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BIN 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BIN n	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Card servicing network infrastructure and development plans

Number of devices	Units			
	Current status	Development plans		
		1st year	2nd year	3rd year
Number of merchants (exclusive of online shops)				
Total number of point-of-sale terminals				
including cash advance offices (CAO)				
Number of ATMs				
Number of payment kiosks				
Number of online shops				

Notice form for modification/refusal of bank identification numbers (BIN) (Form 5)

to be printed on letterhead

**NOTICE OF MODIFICATION/REFUSAL OF
BANK IDENTIFICATION NUMBERS**

(city) _____, 20____

_____ (Participant's full name)

represented by _____ (Participant's authorised person's title and name)

acting under _____ (ground for authorised person's powers)

Participant's individual code _____

1. Issue completion.

We ask you to close the product within BIN _____ to complete the issue
_____ for the following reason:

- fraud;
- nonuse;
- other.

_____ .
(specify the last authorisation date).

2. BIN modification.

We ask you to modify BIN _____ to issue the following card products of the
Mir Payment System based on the existing bank identification numbers _____,

(specify the effective date of modifications).

We confirm the absence of valid Mir cards using existing BINs.

3. Issue of Business cards.

We inform you of using the following range from _____ to _____ within BIN _____ to issue Business cards.

Participant's authorised person's title *signature* *Full name*

Stamp here

Sponsor's approval block

(city) _____ (year) _____

(full name of organisation that is Participant's Sponsor)

being the Sponsor for

(Participant's full name)

in the Mir Payment System, hereby consents to modification/refusal of BINs in accordance with the Mir Payment System Regulation. by the Indirect Participant

(Participant's full name)

(title) (signature) (printed name of authorised person of Sponsor)

Stamp here

Sponsor change statement form (Form 6)

to be printed on letterhead

SPONSOR CHANGE STATEMENT

(city) _____, 20____

(Participant's full name)
represented by _____
(Participant's authorised person's title and name)

acting under _____
(ground for authorised person's powers)

Participant's individual code _____

We hereby inform you about the change of the Sponsor:

Current Sponsor:

for issue _____
(Sponsor's full name, processing solution)

for acquiring _____
(Sponsor's full name, processing solution)

New Sponsor:

for issue _____
(Sponsor's full name, processing solution)

for acquiring _____
(Sponsor's full name, processing solution)

The scheduled deadline for switching to servicing _____.
(specify date)

Participant's authorised person's title *signature* *Full name*

Stamp here

Sponsor's approval block

(city) _____
(year) _____

(full name of organisation that is the Sponsor for organisation changing the Sponsor),

hereby notifies and confirms to the Mir Payment System Operator that it is the Sponsor for

(full name of organisation changing the Sponsor)

and guarantees the Mir Payment System Operator that the Mir Payment System Regulations will be complied with.

(title) (signature) (printed name of authorised person of Sponsor)

Stamp here

**Participant's activity termination statement
form (Form 7)**

to be printed on letterhead

PARTICIPANT'S ACTIVITY TERMINATION STATEMENT¹

(city) _____, 20____

_____ (Participant's full name)

represented by _____ (Participant's authorised person's title and name)

acting under _____ (ground for authorised person's powers)

Participant's individual code _____

We hereby inform you about the termination of supporting the Indirect Participant's activity

_____ (Indirect Participant's full name)

Indirect Participant's individual code _____

Servicing termination date _____ (specify date)

Servicing termination reasons _____

We ask you to complete settlements in accordance with the Mir Payment System Regulations.

Participant's authorised person's title *signature* *Full name*

Stamp here

¹ form for Direct Participants - Sponsors

**Statement form for termination of participation
in the System on the initiative of a Participant
(Form 8)**

to be printed on letterhead

**STATEMENT OF TERMINATION OF PARTICIPATION IN THE MIR PAYMENT SYSTEM
ON THE INITIATIVE OF A PARTICIPANT**

(city) _____, 20____

_____ (Participant's full name)
represented by _____ (Participant's authorised person's title and name)

acting under _____ (ground for authorised person's powers)

Participant's individual code _____

hereby notifies of termination of participation in the Mir Payment System due to

(specify reason for termination of participation in the System).

I ask you to block the following BINs:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Participant's authorised person's title

signature

Full name

Stamp here

Sponsor's block

(city) _____
(year) _____

(full name of organisation that is Participant's Sponsor)

being the Sponsor for

(Participant's full name)

in the Mir Payment System, hereby consents to termination of participation in accordance with the Mir Payment System Regulations

(Participant's full name)

(title) (signature) (printed name of authorised person of Sponsor)

Stamp here

Notice form for termination/suspension of participation in the System on the initiative of the Operator (Form 9)

NOTICE OF TERMINATION/SUSPENSION OF PARTICIPATION IN THE MIR PAYMENT SYSTEM ON THE INITIATIVE OF THE OPERATOR

(city) _____, 20____

Attn:

(Participant's full name, authorised person's title and name)

Destination:

(Participant's registered address)

Dear _____

We hereby notify you of suspension/termination of servicing in the Mir Payment System from _____, 20____, due to _____, in accordance with the Mir Payment System Regulations.
Remedial period set by the System _____.

authorised person's title
JSC NSPC
Stamp here

signature

Full name

Statement form for changing the activity in the Mir Payment System (Form 10)

to be printed on letterhead

**STATEMENT OF CHANGING THE ACTIVITY
IN THE MIR PAYMENT SYSTEM**

(city) _____, 20____

(Participant's full name)

represented by _____
(Participant's authorised person's title and name)

acting under _____
(ground for authorised person's powers)

hereby notifies you of changing the activity in the Mir Payment System:

Direct Participant	
<input type="checkbox"/> Type A	Issue, Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Issue, Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring
Indirect Participant under the sponsorship of _____ (organisation's full name and Sponsor's individual code)	
<input type="checkbox"/> Type A	Issue, Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Issue, Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring
System Participant	
<input type="checkbox"/> Type A	Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring
Participant in the System Participant's payment system	
<input type="checkbox"/> Type A	Acquiring: cash advance and trade acquiring, including Internet acquiring
<input type="checkbox"/> Type B	Acquiring: cash advance
<input type="checkbox"/> Type C	Acquiring: trade acquiring, including Internet acquiring

Participant's authorised person's title

signature

Full name

Stamp here

Sponsor's approval block

(city) _____ (year) _____

(Sponsor organisation's full name)

hereby confirms to the Mir Payment System Operator its consent for the Indirect Participant

(Indirect Participant's full name)

to change its activity in the Mir Payment System.

(title)

Stamp here

(signature)

(printed name of authorised
person of Sponsor)

System Participant's approval block:

(city) _____ (year) _____

(System Participant's full name)

hereby confirms to the Mir Payment System Operator its consent for the System Participant's payment system participant

(full name of System Participant's payment system participant)

to change its activity in the Mir Payment System.

(title)

Stamp here

(signature)

(printed name of authorised
person of System Participant)

Notice form for setting the guarantee deposit amount for a Participant (Form 11)

**NOTICE OF SETTING
THE GUARANTEE DEPOSIT AMOUNT FOR A PARTICIPANT**

Moscow _____, 20____

Attn:

(Participant's name, authorised person's title and name)

Destination:

(Participant's registered address)

Participant's individual code

Dear _____

We hereby notify you that, under the Mir Payment System Regulations, the guarantee deposit amount for _____ (*specify Participant's name*) has been set equal to _____ (*amount in digits and words*) roubles.

We notify you of the need to replenish the guarantee fund account to the specified amount before or on _____.

Remittance details:

Payment purpose:

Appendix: Calculation of the guarantee deposit amount on _____ sheets.

JSC NSPC authorised person's title

signature

Full name