

**NOTIFICATION**

**OF PROVIDER**

**OF ELECTRONIC COMMUNICATION NETWORKS OR ELECTRONIC COMMUNICATION SERVICES**

**§ 1 sec. 3 letter l) Act No. 492/2009 Coll. on payment services**

**(„ZoPS“)**

**December 2022**

**Important information**

|  |  |
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| **List of abbreviations and terms** | |
| **1.** | **DD/MM/RR** – day/month/year |
| **2.** | **EU/EEA** – European Union/European Economic Area |
| **3.** | **Provider of ECN** – provider of electronic communication networks or electronic communication services |
| **4.** | **ZoPS** – Act No. 492/2009 Coll. on payment services |

* **Provider of electronic communication networks or electronic communication services** is an entity, which carries out payment operations according to special regulation[***6a)***](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#poznamky.poznamka-6a) , these payment operations are provided as an additional service to an electronic communication services to user, while sum of a single payment operation is included into the related invoice, the sum of a single payment operation does not exceed 50 eur and the total of the sum of payment operations does not exceed the volume of 300 eur monthly by one user of electronic communication networks or electronic communication services, if [***§ 97b***](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-97b)does not stipulate otherwise, at the same time if the user subscribes for services by electronic communication networks or electronic communication services and these payment operations are intended to:
* 1. purchase of digital content or voice services irrespective of device used for purchase of consumption of digital content or
* 2. execution from electronic device or through it within charitable activity or for purchasing of electronic tickets,

**According to § 97b ZOPS:**

1. *A provider of electronic communication networks or services as referred to in Section* [*1(3)(l)*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-1.odsek-3.pismeno-l) *shall* ***provide to National Bank of Slovakia on an annual basis, a copy of the statutory auditor’s report,46 including a statement that the provider’s activities are in accordance with the limits*** *specified in Section* [*1(3)(l).*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-1.odsek-3.pismeno-l)
2. *A provider of electronic communication networks or services as referred to in Section* [*1(3)(l)*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-1.odsek-3.pismeno-l) *shall be subject mutatis mutandis to the provisions of Section* [*97a(2)(a)*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-97a.odsek-2.pismeno-a) *and* [*(b)*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-97a.odsek-2.pismeno-b) *and* [*paragraphs 5 to 8*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-97a.odsek-5)*, as appropriate.*
3. *After assessing the statutory auditor’s report on compliance by an electronic communication network or service provider with the limits specified in Section* [*1(3)(l),*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-1.odsek-3.pismeno-l) *National Bank of Slovakia shall notify that provider that Section* [*1(3)(l)*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-1.odsek-3.pismeno-l) *does not apply to its activities. Such provider shall, immediately after being notified according to the first sentence, terminate such activities or apply for permission to perform such activities.*
4. *If, after assessing the statutory auditor’s report, National Bank of Slovakia finds that the activities of an electronic communication network or service provider are subject to the provisions of Section* [*1(3)(l)*](https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2009/492/20220101#paragraf-1.odsek-3.pismeno-l)*, it shall inform the European supervisory authority (European Banking Authority) of that provider of electronic communication networks or services and shall provide the Authority with a description of the services provided.*

**Email address for sending of the notification is:** [poskytovatel\_EKS@nbs.sk](mailto:poskytovatel_EKS@nbs.sk)

**SPECIMEN OF NOTIFICATION**

**According to § 1 sec. 3 letter l) ZoPS**

**1. Type of notification**

|  |  |  |
| --- | --- | --- |
| 1.1 | [Notification of a planned start of provision of services (§ 1 section 3 letter l) ZOPS)](#_1.Oznámenie_o_plánovanom) |  |
| 1.2 | [Notification of change](#_3._Oznámenie_o) |  |

**2. Identification data of provider**

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| --- | --- | --- |
| 2.1 | Legal person |  |
| 2.2 | Natural person being an entrepreneur |  |

**3. Date**

|  |  |  |
| --- | --- | --- |
| 3.1 | **Planned beginning of the provision of services** (§ 1 section 3 letter l) ZoPS) | DD/MM/RR |
| 3.2 | Date of the start of change | DD/MM/RR |

**4. Declaration**

I hereby declare that the data submitted, information, notifications, statements, documents, supports or explanations including their annexes are complete, correct, true, exact, and up to date.

|  |  |
| --- | --- |
| Date: | Name and surname (contact person): |
|  |  |

Note\*: only cells marked in blue colour shall be filled in.

**1. Notification**

# **1.1 Notification of a planned start of provision of services (§ 1 section 3 letter l) ZoPS)**

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| --- | --- |
| * + 1. **Detailed description of service** | |
| (Please, give us a description of planned services to be provided in point 1 or 2 (or in both points 1 and 2)   1. **purchase of digital content or voice services irrespective of the device used for the purchase or consumption of digital content or** 2. **execution from or through electronic device or via its means or in the context of charitable activity or for the purchase of electronic tickets** | |
| **1.1.2 Detailed description of services provided:** (please, give us a detailed description) | |
| **1.ddigital content or voice services** | (Please, give us a detailed description) |
| **2.charitable activities, purchase of electronic tickets** | (Please, give us a detailed description) |

If you have an authorization/registration from other regulator, please, fill in this part 1.1.3 (including authorization/registration from the National Bank of Slovakia)

|  |  |
| --- | --- |
| **1.1.3 other type of activity/provision of services** | |
| **a) type (authorization/registration)** | (Type and number/ label of authorization/registration) |
| **b) date of issuance of authorization/registration** | DD/MM/RR |
| **c) competent authority that issued authorization/registration** | (Name of the entity) |
| **Method of information of the user about regulated activities** | |

# **1.2 Notification of change**

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| **Change in the scope of services provided** |
| (Please, give us a detailed description) |
| **Change of registered address/ contact persons/ other information notified** |
| (Please, give us a detailed description) |

**2. Identification data**

# **2.1. Identification data of the provider**

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| --- | --- |
| **Legal person** |  |

If you provide services as legal person, please, fill in the part 2.1.2

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| --- | --- | --- | --- |
| **2.1.2 Legal person** | | | |
| **a)** | **Name** (business name) | |  |
| **b)** | **Identification number** (IČO, if attributed) | |  |
| **c)** | **Address** | **street, descriptive number** |  |
| **town and postal code** |  |
| **state** |  |
| **d)** | **Type of business activity or other activity** | |  |
| **e)** | **Address of the entity or organizational units or other address of provision of activity** | **street, descriptive number** |  |
| **town and postal code** |  |
| **state** |  |
| **f)** | **Designation of administrative register or other administrative evidence, in which the entity is inscribed and number of inscription into this register or evidence** | |  |
| **Data on persons** | | **1. acting for the subject** | |
| Name and surname |  |
| Function |  |
| Telephone number |  |
| Fax number |  |
| e-mail address |  |
| **2. responsible for the information provided** | |
| Name and surname |  |
| Function |  |
| Telephone number |  |
| Fax |  |
| e-mail address |  |

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| --- | --- |
| **Natural person being an entrepreneur** |  |

If you provide services as personal entity, please, fill in the part 2.1.3

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| **2.1.3 Natural entity** | | | |
| **a)** | **Name and surname:** | |  |
| **b)** | **Birth number** (if given) | |  |
| **c)** | **Day of birth** | |  |
| **d)** | **Place of birth** | |  |
| **e)** | **Place of permanent residence** | **street and descriptive number** |  |
| **town and postal code** |  |
| **state** |  |
| **f)** | **Place of temporary residence** (if available) | **street and descriptive number** |  |
| **town and postal code** |  |
| **state** |  |
| **g)** | **Address of place of business** | **street and descriptive number** |  |
| **town and postal code** |  |
| **state** |  |
| **h)** | **Identification number** (IČO, if attributed) | |  |
| **i)** | **State affiliation** | |  |
| **j)** | **Type and number of identity document** | |  |
| **k)** | **Area of business** | |  |
| **l)** | **Designation of administrative register or other administrative evidence, in which the entity is inscribed and number of inscription into this register or evidence** | |  |
| **Data on persons** | | **1. acting for the subject** | |
| Name and surname |  |
| Function |  |
| Telephone number |  |
| Fax |  |
| e-mail address |  |
| **2. responsible for the information provided** | |
| Name and surname |  |
| Function |  |
| Telephone number |  |
| Fax |  |
| e-mail address |  |

Please, fill in the additional data in the part 2.1.3, if relevant for your case.

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| **2.1.3 Entity submitted notification concerning the intention to use electronic communication exception in other member state of the EU/EEA?** (If yes, give us, please, details) | |  |
| Date of submission of notification |  | |
| Member state of the EU/EEA |  | |
| Name of institution |  | |

**Annexes:** (if you are adding annexes, please, add them into the table according to their name and serial number)

For example (verification of limits from statutory auditor for the year passed)

**Annexes:**

|  |  |
| --- | --- |
| **Number** | **Name of Annex:** |
| 1. |  |
| 2. |  |
| 3. |  |
| … |  |