

Use Case Declaration Form

1. Partner information

1.1 Partner Details

Company Name	
Company Address	
Company Website	
Contact Name	
Contact Phone	
Contact E-Mail	
VAT-ID	
Commercial Register Number and Location	

1.2 Technical Contact

Contact Name	
Contact Phone	
Contact E-Mail	

1.3 The Partner has the right to sublicense the service to the following company ("Service Provider"):

Company Name	
Company Address	
Company Website	
Contact Name	
Contact Phone	
Contact E-Mail	

2. Service Provider information

Company Name		
Company Address		
Company Website		
Contact Name		
Contact Phone		
Contact E-Mail		
Mobile Connect service <i>(please tick)</i>	ATP (SIM SWAP) <input type="checkbox"/>	Verified MSISDN Match <input type="checkbox"/>
	KYC Match (Hashed) <input type="checkbox"/>	(Hashed)
Lawful basis for data processing <i>(please tick)</i>	Legitimate Interest <input type="checkbox"/>	Customer consent with Service Provider <input type="checkbox"/>



Please fill in section 3, 4, 5



Please fill in section 3, 4, 6

3. Use Case

*Provide a brief description, preferably from the consumers point of view.
Please consider using e.g., screen shots and/or user flow diagrams to clarify the description.
Please also state at which point the selected Mobile Connect service is used.*

The lawful purpose of identity verification, fraud prevention or compliance with laws designed to prevent money laundering.

4. Privacy Policy

4.1 URL associated with the relevant Service Provider's privacy policy:

Date of validity of the privacy policy: _____ (current or planned date)

4.2 URL associated with the relevant Service Provider's terms of service:

Date of validity of these terms of service: _____ (current or planned date)

5. Legitimate interest

*Please proof why legitimate interest is the lawful basis of processing customer data.
Add a description of the fraud case and how the selected Mobile Connect service helps to prevent this.*

6. Customer Consent with Service Provider

6.1 URL associated with the Service Provider's consent policy:

Date of validity of the consent policy: _____ (current or planned date)

6.2 How and when will consent be obtained from the customer? Screen shot(s) is (are) mandatory here!

6.3 Quote the consent text that will be presented to the customer.

Submitted by (partner name)

_____, dated _____

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(Partner name)