

Enclosure 1 Turnover Specification Form

IMPORTANT: Please complete this form in block letters. Have the form signed by an authorized person. For more information about how to fill out this form, please refer to enclosure 2. Please return the completed form to ACM no later than **1 January 2017**.

1 . Details

Name of undertaking:
Name as registered with the Dutch Chamber of Commerce;

ACM registration number(s):
Mentioned in the letterhead.

Chamber of Commerce number:
Any Invoices will be sent to the address registered with the Dutch Chamber of Commerce

Is the address in the letterhead correct? If so, do not enter address
 If not, enter your complete address below

Postal address:
.....

Name of contact person: M F
The name of the person ACM may contact in case of questions about this specification

Telephone number:

Email address:

ATTENTION! Based on the amount of your relevant net turnover, you will have to fill out different fields, and will have to hand in different documents as supporting documents. Please fill out the applicable fields.

2 . If your net turnover (relevant or otherwise) is equal to or exceeds EUR 8,800,000, please complete the field below:

In 2015 total net turnover
 relevant net turnover (see enclosure 2)

of the undertaking noted above amounted to:

EUR

Please state the amount here in writing:
.....

You are required to enclose the following details:

- A copy of your annual accounts stating the amount of your net turnover, supported by the Auditor's report thereof.
- or
- A detailed specification of your relevant net turnover, in which it has been made clear, and supported with reasons, which services and thereto-related turnover are considered not relevant. In

In addition, you are required to state the amount of your total net turnover. The detailed turnover specification must be supported by an Auditor's report. A template for the Auditor's report can be found on www.acm.nl. Furthermore, you are required to enclose a copy of the annual accounts.

If you have entered all of the required information, please proceed to field 4.

3 . If your net turnover (relevant or otherwise) is less than EUR 8,800,000, please complete the field below:

In 2015 total net turnover
 relevant net turnover (see enclosure 2)

of the undertaking noted above amounted to:

EUR

Please state the amount here in writing:

If you have entered all of the required information, please proceed to field 4.

4 . Group Turnover Specification *(please tick the applicable box)*

Does your undertaking belong to a group of undertakings within the meaning of Section 24b of Book 2 of the Dutch Civil Code, within which other companies provide public electronic communications activities in the Netherlands as well?

ACM advises you to direct any further questions to your accountant.

- Yes *(Proceed with this field)*
- No *(Proceed to field 5)*

If your answer is yes, you are obliged to submit a group turnover specification. Please indicate below which situation is applicable to your undertaking:

The undertaking mentioned in field 1 will submit the group turnover specification for the group of undertakings. Please enter below the names of the undertakings to which the turnover specification pertains:

- 1).....
- 2).....
- 3).....
- 4).....
- 5).....

In this case, you are also required to enclose the following details:

- a. A statement from your Auditor confirming that your undertaking, together with the aforementioned undertakings, belongs to a group of undertakings within the meaning of

Section 24b of Book 2 of the Dutch Civil Code.

b. Proof that the person signing the form is authorized to do so. For example, you could submit a copy of the registration with the Dutch Chamber of Commerce, containing the authorization to sign. This copy must be certified and must be less than one year old.

The undertaking named in field 1, as a constituent of a group of undertakings, does not submit a separate turnover specification of its own. The net turnover (relevant or otherwise) for 2015 of said undertaking is included in the turnover specification of:

.....
(name of party submitting the group turnover specification)

If you have entered all of the required information, please proceed to field 5.

5 . Consumer Complaints Board for Telecommunications

The undertaking named in field 1 provides services to:

- Consumers *(proceed with this field)*
- Businesses *(proceed to field 6)*
- Consumers and businesses *(proceed with this field)*

The undertaking named in field 1 grants ACM permission to inform the Consumer Complaints Board for Telecommunications (hereinafter: SGC) about the category (1, 2 or 3) in which you think you belong according to the tariff system of the SGC:

- Yes
- No

See the enclosure: "Consumer Complaints Board for Telecommunications".

If you have entered all of the required information, please proceed to field 6.

6 . Signature

As authorized signatory of the undertaking named in field 1, I hereby declare that all information stated above is true, correct and complete.

Place and date:

Name:

Signature: