

Use IRRIS Web, the web declaration portal, to update and check your data

RIGHTSHOLDER/AGENT GENERAL INFORMATION

- 1) If this is an update, kindly indicate your AGICOA Rightsholder's Identification Number
- 2) **Full Company name or first name and last name if Rightsholder or Agent is a Natural Person.**
(Agent: natural person or legal entity managing the rights on behalf of a Rightsholder) **Agent** (tick if you are an Agent)

first name last name

- 3) **Type:** Natural Person ; Legal Entity .
- 4) **Language of correspondence:** English ; French .
- 5) Rightsholder/Agent Company Street and number

- 6) Zip 7) **City**
- 8) **Country**
- 9) Main Phone Prefix Number
- 10) Phone 2 Prefix Number
- 11) Main Fax Prefix Number
- 12) Fax 2 Prefix Number
- 13a) Website 13b) E-mail
- 14) VAT No

CONTACT No 1

- 15) Ms ; Mr ; Dr ; Other . (specify)
- 16) First and Last Name first name last name
- 17) Function
- 18) **Preferred Media:** Fax ; Mail ; E-mail .
- Outgoing correspondence:
- 19) **Contact for Works & Rights:** Yes ; No . 20) **Contact for Finance:** Yes ; No .

Incoming correspondence:

- 21) Contact No 1 is authorized to sign the following documents:

Rightsholder's/Agent's data updates Bank information
New Works & Rights declarations
Works & Rights updates
Portfolio Transfers

Contact No 1 Address (if different from 5), 6), 7), 8) above)

- 22) Street and number
- 23) Zip 24) **City**
- 25) **Country**

Contact No 1 Numbers (if different from 9), 10), 11), 12) above)

- 26) Phone Prefix Number 27) Fax Prefix Number
- 28) Mobile Prefix Number 29) E-mail

CONTACT No 2

30) Ms ; Mr ; Dr ; Other . (specify)

31) First and Last Name

first name

last name

32) Function

33) **Preferred Media:** Fax ; Mail ; E-mail .

Outgoing correspondence:

34) **Contact for Works & Rights:** Yes ; No . 35) **Contact for Finance:** Yes ; No .

36) Incoming correspondence - Contact No 2 is authorized to sign the following documents:

- Rightsholder's/Agent's data updates
- Works & Rights updates
- Bank information
- New Works & Rights declarations
- Portfolio Transfers

Contact No 2 Address (if different from 5), 6), 7), 8) above)

37) Street and number

38) Zip

39) **City**

40) **Country**

Contact No 2 Numbers (if different from 9), 10), 11), 12) above)

41) Phone Prefix Number 42) Fax Prefix Number

43) Mobile Prefix Number 44) E-mail

CONTACT No 3

45) Ms ; Mr ; Dr ; Other . (specify)

46) First and Last Name

first name

last name

47) Function

48) **Preferred Media:** Fax ; Mail ; E-mail .

Outgoing correspondence:

49) **Contact for Works & Rights:** Yes ; No . 50) **Contact for Finance:** Yes ; No .

51) Incoming correspondence: Contact No 3 is authorized to sign the following documents:

- Rightsholder's/Agent's data updates
- Works & Rights updates
- Bank information
- New Works & Rights declarations
- Portfolio Transfers

Contact No 3 Address (if different from 5), 6), 7), 8) above)

52) Street and number

53) Zip

54) **City**

55) **Country**

Contact No 3 Numbers (if different from 9), 10), 11), 12) above)

56) Phone Prefix Number 57) Fax Prefix Number

58) Mobile Prefix Number 59) E-mail

PAYMENT DETAILS

Beneficiary

60) **Beneficiary Type:** Rightsholder ; Association ; Other .

61) Beneficiary Name

first name

last name

62) Beneficiary Address

63) Zip

64) **City**

65) **Country**

66) Money Laundering

(If the Bank account has a beneficiary "Other" who does not correspond to the Rightsholder or his/her Agent or Association, tight money laundering legislation requires the explanation of the third beneficiary)

Bank (Our internal control procedures require you to provide AGICOA with a [copy of a bank account statement](#) that can confirm details given here. Kindly send it to your contact in the AGICOA Alliance.) (click)

67) Bank Account

IBAN: International Bank Account Number

Other:

68) Bank Name

(BIC/SWIFT or ABA-formatted bank identification code must be provided.)

BIC/SWIFT: Unique Bank Identification Code

or

ABA: American Bankers Association Number

69) Bank Address

70) Zip

71) City

72) Country

REPRESENTATION AT AGICOA GENERAL ASSEMBLY (As per AGICOA by-Laws, Rightsholders are represented by [our Members](#) at our General Assembly. Kindly let us know which of them - if any - you are affiliated to.) (click)

73) None

76) Name

74) Name

77) Name

75) Name

78) Name

Specimen of signature(s), stamp(s) or seal(s) of the person(s) entitled to sign as per authority and details given under "Contacts" above and specimen of the Company stamp or seal of the Declarant organization.	
Rightsholder's or Agent's Signature	Date
Signature of Contact No 1	Date
Signature of Contact No 2	Date
Signature of Contact No 3	Date
Specimen of the Company Stamp or Seal	