

Power of attorney

Customer (principal)

Contract number

Company*

First name/
Surname

Date of birth (dd.mm.yyyy)

I hereby grant Power of Attorney (without a right of substitution) to:

First name/
Surname

Date of birth (dd.mm.yyyy)

Residential address

This Power of Attorney shall serve solely for my representation before Cembra Money Bank AG ("Bank") and be limited to matters pertaining to the above contract. The Agent shall be authorised to obtain information in my name in connection with the aforementioned contract, to obtain access to relevant files and to have such files issued to him or her.

This Power of Attorney shall also include authority for acknowledgement of debt and the conclusion of payment agreements.

I hereby relieve the Bank of any obligation to inform me of actions taken by the Agent. This Power of Attorney shall be valid for the Bank until it is rescinded in writing. This Power of Attorney shall also remain in effect even after my death, bankruptcy, being declared missing or loss of my legal capacity.

Place, date , (dd.mm.yyyy)

Customer signature _____

Place, date , (dd.mm.yyyy)

Agent signature _____

* Companies please note: if a company wishes to grant power of attorney, this power of attorney can only be signed by persons authorised to represent the company in accordance with the Commercial Register.