**"POWER OF ATTORNEY"**

**& SPECIMEN OF THEIR SIGNATURES**

The persons named below are authorized to represent, without any restrictions ,

[company name]…………………………….. in relation to Affinor bvba - Kompellaan 3 – 3600 Genk \* Belgium.

|  |  |  |  |
| --- | --- | --- | --- |
| Name and first name | Signing rights  (jointly or individually) | Signature | Phone number and E-mail |
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***All persons identified must send a certified true copy of a valid passport or ID card***

All indications in this form are valid unless otherwise advised by the company in writing.

**Signed on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (*company stamp*)

Authorised signatory\* Authorised signatory\*

Name Name

Title Title

Date, Place Date, Place

*(\*Please make sure that the signatories are those mentioned and identified in the Due Diligence process for the opening of your account with Affinor bvba – Kompellaan 3 – 3600 Genk \* Belgium in accordance with their signature right (single or jointly by two).*