

For Bank use only: Customer ID

▶ Customer Associate

This Customer Associate section should be completed for each separate legal entity whose accounts will be reported on each specific E-Channel for the Customer to access. You may copy this section if you have more than one Customer Associate.

▶ Customer Details

Full customer name

Principal Bank (ie Customer's Bank)

▶ Customer Associate Details

Customer associate name

Address and postal code

▶ Customer Associate Letter of Authority

**To: Principal Bank (named above)
Account Holding Bank(s) (named above)**

From: Customer Associate (named above)

The Customer has entered into an agreement with Principal Bank (the Customer Agreement) under which the Customer may use the relevant E-Channels as set out in the Accounts and Services Schedule from time to time access, view and transact on certain bank accounts. We have appointed the Customer as our agent to access our accounts defined in the Accounts and Services Schedule or such other accounts as may be notified to you by the Customer or Customer Associate from time to time (the Accounts) in accordance with this Customer Associate Letter of Authority.

1. We hereby authorise the Principal Bank and the Account Holding Bank(s) to provide the Customer with access to the Accounts in accordance with this Customer Associate Letter of Authority.
2. We confirm the Customer is entitled to view and transact on and use the other services available via the respective E-Channels from time to time in relation to the Accounts. We confirm the Customer is entitled to agree on our behalf on applicable terms from time to time relating to the access and use of the Accounts.
3. We represent and warrant that we have full legal and corporate authority to appoint the Customer for the purpose stated herein.

Where the Customer Agreement is the "HSBCnet Customer Agreement", all references to "E-Channels" herein shall for all purposes be references to "HSBCnet".

We shall be bound by all actions of the Customer taken in respect to the Accounts and shall ratify and confirm all things done by the Customer on our behalf in accordance with purposes stated herein.

The appointment of the Customer shall remain in full force and effect until the day following seven (7) days after the Principal Bank receives written notice of revocation signed by our authorised signatory(ies) or until termination of the appointment of the Customer by operation of law.

We have taken all necessary actions to authorise the entering into of this Customer Associate Letter of Authority, the person(s) who sign below have been duly authorised to sign this Customer Associate Letter of Authority, which, along with such authorisations, are in accordance with the applicable constitutional documents of the Customer Associate.

This Customer Associate Letter of Authority is governed by and will be construed in accordance with the Governing Law set out in the section entitled Principal Bank and Governing Law in Section 1. The parties irrevocably submit to the non-exclusive jurisdiction of the courts of that named jurisdiction in respect to any proceedings which may be initiated in connection with this Customer Associate Letter of Authority.

Signed for and on behalf of the Customer Associate.

Full name in BLOCK Letters

Job title

Signature of authorised representative

Date

Full name in BLOCK Letters

Job title

Signature of authorised representative

Date