**"POWER OF ATTORNEY"**

**& SPECIMEN OF SIGNATURES**

The persons named below are authorized to represent without any restrictions

[company name]…………………………….. in its relations with Affinor BVBA - Kompellaan 3 – 3600 Genk \* Belgium

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

All indications given in this form will be 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 announced and identified in the due diligence process for the opening of your account with Affinor BVBA in accordance with their signature right (single or jointly by two)*