

# Power of attorney regulations for legal entities, partnerships and sole proprietorships

(applies to holders/bodies and authorized persons with or without substitution)

Authorization (excluding credit cards) between PostFinance and the following contractual partner, hereinafter referred to as the Customer:

## 1. Customer details

Company/Name \_\_\_\_\_  
Street \_\_\_\_\_ No. (Domicile) \_\_\_\_\_  
Postcode \_\_\_\_\_ Location \_\_\_\_\_  
Country \_\_\_\_\_

## 2. Issue authorization

The Customer authorizes the person below to be his/her legal representative to PostFinance. In particular, the authorized person is entitled to access the assets invested at PostFinance in the name of the Customer and to submit other legally binding statements, including subscribing to certain new services and potentially ending the business relationship. The person is also entitled to obtain information on all stocks/transactions retroactively on all authorized accounts and custody accounts, or to request them via e-finance. The person may also issue sub-authorizations to third parties (known as e-rights) in e-finance. The signatures as well as all declarations submitted and measures taken by the authorized person are binding for the principal. The authorization does not expire if the Customer dies, loses the capacity to act or becomes insolvent (Article 35 of the Swiss Code of Obligations). It shall remain in force until PostFinance receives written revocation thereof, that is provided that PostFinance does not authorize other communication channels to revoke it at that point in time. The authorized person and the Customer shall notify PostFinance promptly of any changes to the personal details given below of the authorized person.

### Authorized person 1

Ms       Mr

Last name \_\_\_\_\_

First name \_\_\_\_\_

Date of birth \_\_\_\_\_

Nationality \_\_\_\_\_

Function \_\_\_\_\_



Authorized person should sign within the box

### The power of attorney arrangement applies

to all current and future business relationships or

only to the following account/custody account number

\_\_\_\_\_

\_\_\_\_\_

or

only for account/custody account numbers as per the list enclosed

### Type of signature (only 1 selection possible)

sole

collective

collective group A\*

collective group B\*

### Substitute power of attorney (optional)



By selecting this option, the authorized person is granted extensive representation rights. They can be the principal's representative to PostFinance in all matters (including those of a strategic nature). In particular, the authorized person is entitled to authorize other individuals.



### Authorized person 2

Ms       Mr

Last name \_\_\_\_\_

First name \_\_\_\_\_

Date of birth \_\_\_\_\_

Nationality \_\_\_\_\_

Function \_\_\_\_\_



Authorized person should sign within the box

### The power of attorney arrangement applies

to all current and future business relationships or

only to the following account/custody account number \_\_\_\_\_

or

only for account/custody account numbers as per the list enclosed

### Type of signature (only 1 selection possible)

sole

collective

collective group A\*

collective group B\*

### Substitute power of attorney (optional)

By selecting this option, the authorized person is granted extensive representation rights. They can be the principal's representative to PostFinance in all matters (including those of a strategic nature). In particular, the authorized person is entitled to authorize other individuals.

### Authorized person 3

Ms       Mr

Last name \_\_\_\_\_

First name \_\_\_\_\_

Date of birth \_\_\_\_\_

Nationality \_\_\_\_\_

Function \_\_\_\_\_



Authorized person should sign within the box

### The power of attorney arrangement applies

to all current and future business relationships or

only to the following account/custody account number \_\_\_\_\_

or

only for account/custody account numbers as per the list enclosed

### Type of signature (only 1 selection possible)

sole

collective

collective group A\*

collective group B\*

### Substitute power of attorney (optional)

By selecting this option, the authorized person is granted extensive representation rights. They can be the principal's representative to PostFinance in all matters (including those of a strategic nature). In particular, the authorized person is entitled to authorize other individuals.

\* If required, collectively authorized persons may be divided up into groups. This means persons from group A can only sign with persons from group B or persons not categorised into any group.

### 3. Remove power of attorney

The power of attorney of the following person(s) is to be deleted

Last name \_\_\_\_\_ First name \_\_\_\_\_ Date of birth \_\_\_\_\_

Last name \_\_\_\_\_ First name \_\_\_\_\_ Date of birth \_\_\_\_\_

Once the authorization is cancelled, **any e-finance authorization is also cancelled, as is any PostFinance Card.**



#### 4. Signature(s)

The Customer confirms the authenticity of the signatures provided above and recognizes the authorizations granted.

Signature of the holder/body or of the person authorized for substitution. For collective signing, two signatures are required.

Date \_\_\_\_\_



Signature L ┘

Signature L ┘

Last name \_\_\_\_\_

Last name \_\_\_\_\_

First name \_\_\_\_\_

First name \_\_\_\_\_

**Send to:**  
PostFinance Ltd, Scan Center, 3002 Berne

#### For internal purposes

Partner number	_____
Locality code	_____

