

Power of attorney

Client number _____

Client (Principal)

| | |
|----------------------------|-----------------|
| Last name ¹ | Street/no. |
| First name ¹ | Post code/place |
| Date of birth ¹ | Country |

Please describe your relationship (family, business) to the attorney:

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Attorney with individual power of disposal

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|------------------------------|---------------------------------------|
| Last name ¹ | Date of birth ¹ |
| First name ¹ | Country of birth ¹ |
| Street/no. ^{1,2} | Nationality ¹ |
| Post code/place ¹ | Second nationality |
| Country ¹ | Telephone ¹ |
| E-mail ¹ | Mobile (login e-banking) ¹ |

¹ These fields must be completed ² residential address; no post box, no c/o address

The client (hereinafter referred to as "client") hereby appoints the attorney (hereinafter referred to as "attorney") with respect to the bank zweiplus ltd (hereinafter referred to as "bank") to represent him in all legal acts which relate to the above mentioned client number without any restrictions. He is also authorized to access credits and to make pledges on behalf of the attorney. The attorney is also authorized to make payments for his own benefit or for the benefit of third parties and to open or close custody accounts/savings account under the above mentioned client number. The bank may make the authorization of a specific type of business dependent on the signing of separate powers of attorney.

The power of attorney shall not be extinguished in the event of death, the declaration as a missing person, the loss of capacity to act or the insolvency of the client. The attorney is aware that after the death of the client he shall protect the interests of his heirs and obtain their instructions and is accountable to them. The bank reserves the right to make legal acts of the attorney dependent on the granting of authorization or legitimating documents and/or written declarations of consent on the part of the heirs or representatives of the client. A revocation of the power of attorney by the client, his representatives or individual heirs is possible at any time. Further powers of attorney would not be affected by the revocation of the power of attorney.

Power of attorney

Access to e-banking for the attorney

The attorney should also be able to use the e-banking offered by the Bank for all current and future accounts/custody accounts held under the above-mentioned client number in the name and for the account of the client:

Yes, e-banking access for the attorney is desired.

The attorney already has e-banking access and requests that this e-banking authorization be encrypted using the identical authentication details, insofar as technically possible.

Contract number: _____

No, e-banking access for the attorney is not desired.

The client and attorney (hereinafter referred to jointly as the "undersigned parties") acknowledge that the e-banking services may not be activated until the **Terms and Conditions for e-banking** have been accepted by the attorney within the scope of the first login process. Furthermore, subsequent to activation of the e-banking services, bank documents and statements will no longer be dispatched via mail, but rather sent in electronic form through the e-banking system.

When using e-banking services, **identification** of the attorney is verified **through a self-authentication process** by means of entering his/her authentication details (i.e. Contract number, password, SMS access code). The client unconditionally accepts all transactions booked to the accounts/custody accounts maintained under the client number designated above, insofar as they have been executed with the attorney's relevant authentication details. This also particularly applies to any transactions that are carried out with the misuse or erroneous use of the attorney's authentication details.

The attorney should safeguard the authentication details separate from one another. Revealing or disclosing the attorney's authentication details is prohibited. If the undersigned parties have any reason to suspect that **unauthorized third parties** have gained knowledge of the authentication details, they are obliged to contact the Bank immediately.

The undersigned parties explicitly confirm that they have waived any personal advisory services by the Bank and also acknowledge awareness of the risks associated with the transactions to be carried out via the e-banking system by the attorney. Furthermore, the client hereby confirms that he/she is willing and able to bear the potential losses resulting from such transactions. The client also absolves the Bank of conducting any verification in this regard as well as accepting the liability for any losses resulting therefrom or from the relevant transactions.

The e-banking services are offered via the Internet and therefore by means of an open, publicly accessible network. Transmission of data via the Internet is carried out across borders on a regular and uncontrolled basis. Although the data are transmitted by encrypted means, the sender and recipient are still identifiable in any case. It is therefore possible for a third party to draw conclusions about an existing banking relationship.

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|------------|----------------------------|
| Place/date | X Signature of attorney |
|------------|----------------------------|

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|------------|--------------------------|
| Place/date | X Signature of client |
|------------|--------------------------|

A copy of an official identification sources (passport, identification card, CH driver's license in credit card format, residence permit "B" or "C") of the attorney has to be submitted to the bank.

Only if e-banking is desired: confirmation of receipt

The client confirms that he has received the **Terms and Conditions for e-banking** and agrees to them in full.

| | |
|------------|--------------------------|
| Place/date | X Signature of client |
|------------|--------------------------|

Received on _____ personally e-mail e-banking
 telephone letter fax Initials CRM _____