



## AUTHORISATION TO PROVIDE ACCESS TO COFANET ESSENTIALS AND COFAMOVE

Registration by letter, e-mail or telefax +43/1/515 54-50292

To

Compagnie Francaise D'Assurance Pour Le Commerce Exterieur SA Niederlassung Austria  
Marxergasse 4c  
1030 Vienna

In accordance with the General Terms for the Use of CofaNet Essentials and CofaMove, we hereby authorize Compagnie Francaise D'Assurance Pour Le Commerce Exterieur SA Niederlassung Austria, to enable the person designated below as „Administrator“, as well as other persons authorized by the Administrator to access data in CofaNet Essentials and CofaMove (view only, in particular, information on credit applications/limits). We may revoke this authorization at any time.

### AUTHORIZED PERSON

Company name \_\_\_\_\_

Street, Number \_\_\_\_\_

Postal code \_\_\_\_\_ City \_\_\_\_\_

e-Mail \_\_\_\_\_

### POLICY NUMBERS

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

\_\_\_\_\_

Place, Date

\_\_\_\_\_

Authorized signature