

Power of attorney for private customers

	<u> </u>		
Principal			
□Ms	□Mr		
First name		Last name	
Date of birth		Postal code/city	
Address		Card account no.	110
(hereinafter the F	Principal)		Your card account number is required . You can find it printed on your monthly bill or at the "one" digital service.
The undersigne	ed Principal herewith grants P	ower of Attorney to	
□Ms	□Mr		
First name		Last name	
Date of birth		Postal code/city	
Address		Name of the bank*	
(hereinafter the A	Authorised Agent)	* Only complete if P	ower of Attorney is to be granted to the bank.
The Authorised A account of third Principal hereby it is revoked in w It is explicitly stat Obligations Art. This Power of A contracting parti	parties. The signatures and all st certifies the authenticity of the Arriting. ted that this Power of Attorney s 35). Attorney is governed by Swiss Iners. The Principal and the Auti	o which this Power of Attorney authorised atements and actions of the Authorised Authorised Agent's signature and accepthall remain in force in the event of the Blaw, which shall also determine the value.	es him/her for his/her own account or for the Agent are fully binding on the Principal. The ts the validity of the Power of Attorney until Principal's death or incapacity (Swiss Code of alidity of the applicable law chosen by the eplace of jurisdiction as the location of in any other competent jurisdiction.
Place/date		Place/date	
Signature of the	Authorised Agent	Signature of the Pri	incipal
		turn the fully completed, signed form by es SA, Hagenholzstrasse 56, P.O. Box 700	