

Client Authority for Representative

to be completed by and signed by all ultimate beneficial owner(s)

Client / Company Name :

I / We, the undersigned:

1. Authorise Law Partners to contact, discuss and accept instructions from my / our authorised representative(s), whose details appear below, in respect of the above company.
2. Indemnify and agree to keep indemnified, Law Partners from and against all actions, claims, demands, liabilities, obligations, losses, damages, costs (including without limitation interest and legal fees) and expenses of whatever nature (whether actual or contingent) suffered or incurred, sustained by or threatened against Law Partners whatsoever and howsoever arising from or in connection with or in any way relating to Law Partners in good faith accepting and acting on instructions received from my / our authorised representative, by facsimile transmission or e-mail and signed by or purporting to be signed by, or e-mailed by me / us or by my / our authorised signatories.
3. Undertake to inform Law Partners of any changes to my / our authorised representative(s).

Details of Authorised Representative(s)*:

Type of representative (tick box) accountant solicitor trustee executor other

If other, explain relationship to you

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Name	Phone
Address	Mobile
.....	Facsimile
.....	Email

True copies of the identification page(s) of the Authorised Representative(s) current passport (s), showing his / her signature(s) and photograph(s) are attached to this Certification.

Signature(s) of

Representative(s) _____

Print full name _____

*Where this is a professional firm, this includes employees and representatives as named above.

Special Instructions : (eg, solicitor, trustee, executor instructions are to be accepted in the event of my / our demise only)

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Dated at on the day of, 20.....
 (place) (day) (month) (year)

Read and accepted by:

Signature
 (Ultimate beneficial owner)

Signature
 (Ultimate beneficial owner)

Print full name

Print full name