

Power of attorney



for information and transactions from an account - individual

I, the undersigned, _____, Icelandic ID no. _____, hereby appoint

Name:		Icelandic ID no:
Address:		Tel:
Postcode:	Place:	Email:

my true and lawful attorney "the Attorney" to manage on by behalf the accounts ("the Accounts") indicated below. The Attorney can access and perform any actions generally associated with such accounts, such as make withdrawals, review account balances and establish additional debit cards in the name of the Attorney. The power of attorney is as extensive in scope as the powers I possess over the account at any given time, including the use of an overdraft facility.

Account no.
Account no.
Account no.
Account no.
Account no.

Account no.
Account no.
Account no.
Account no.
Account no.

The power of attorney is effective from _____ until _____ or until revoked in writing (EY-9802)

Sample signature of the Attorney: _____

Signature and witnesses:

In witnesses of the correct date, signature and financial competence:

Place

Date (DD.MM.ÁÁÁÁ)

Name and ID. no

Signature of account owner

Name and ID. no

