Revocation of power of attorney



for making withdrawals and collecting information and/or access authorisations in Online Bank and App

The undersigned account owner / holder of power of attorney hereby sends notification of the revocation/cancellation of the following powers of attorney that have been granted by the following account owner:

Account Owne	er:			
Name:			ID no.:	
Address:				Tel.:
Postcode: City:			Email:	
by Íslandsbank	ki hf., including all access to O n of power of attorney for with cand App:	online Bank and App. drawals and information g		all accounts of the account owner held e following accounts, including all access
Account no.:		Aco	Account no.:	
Account no.:		Acc	Account no.:	
Account no.:		Aco	Account no.:	
Account no	D.:	Acc	Account no.:	
Information about grantor: Name:				ID no.:
Address:				Tel.:
Postcode:	City:		Email:	
is confirmed by th	he Banks' employee. The Ban evocation of the power of atto	k does not warrant the lo orney, such as due to the	ss of the registere	n received by Íslandsbanki and the recei ed user of the online bank or apps that ma ayments to a creditor that the attorney-i
	 Grantor			_

