

3 – ADD NEW POWERS OF ATTORNEY / CHANGE OR REVOKE EXISTING POWERS OF ATTORNEY

New Change (Please specify here which existing authorized representative's stored information you wish to change. Please complete all fields.):

Company authorized representative 1

First name _____
Last name _____
Street/No. (address of residence) _____
Zip code _____ Town _____
Country (country of residence) _____
Date of birth _____ Nationality _____
Phone _____

Cell phone¹ _____

Email¹ _____

By signing as an authorized representative, I (1) confirm the accuracy of the information provided above and declare that (2) I have read, understood and accepted the Terms and Conditions of powers of attorney (Section 5).

Signature Company authorized representative 1

New Change (Please specify here which existing authorized representative's stored information you wish to change. Please complete all fields.):

Company authorized representative 2

First name _____
Last name _____
Street/No. (address of residence) _____
Zip code _____ Town _____
Country (country of residence) _____
Date of birth _____ Nationality _____
Phone _____

Cell phone¹ _____

Email¹ _____

By signing as an authorized representative, I (1) confirm the accuracy of the information provided above and declare that (2) I have read, understood and accepted the Terms and Conditions of powers of attorney (Section 5).

Signature Company authorized representative 2

New Change (Please specify here which existing authorized representative's stored information you wish to change. Please complete all fields.):

Company authorized representative 3

First name _____
Last name _____
Street/No. (address of residence) _____
Zip code _____ Town _____
Country (country of residence) _____
Date of birth _____ Nationality _____
Phone _____

Cell phone¹ _____

Email¹ _____

By signing as an authorized representative, I (1) confirm the accuracy of the information provided above and declare that (2) I have read, understood and accepted the Terms and Conditions of powers of attorney (Section 5).

Signature Company authorized representative 3

¹ Rapid communication is made possible by providing your email address and cell phone details. Electronic communication is associated with specific risks and due diligence requirements (please refer to § 7.4 and § 10.1 (k) in the General Terms and Conditions for Corporate Cards of Swisscard AECS GmbH). Exchanging information and placing orders by email is only permitted to a limited extent (see § 3.2 in Section 5 – Terms and Conditions of powers of attorney).



3 – ADD NEW POWERS OF ATTORNEY / CHANGE OR REVOKE EXISTING POWERS OF ATTORNEY – CONTINUED

Revocation of powers of attorney

The following power of attorney/powers of attorney is/are revoked effective immediately:

First name	Last name	Date of birth
First name	Last name	Date of birth
First name	Last name	Date of birth

4 – COMPANY SIGNATURES

By signing, the company (1) confirms the accuracy of the information provided above and declares that (2) it has read, understood and accepted the Terms and Conditions of powers of attorney (Section 5).

Town	Date
First name and last name (in block capitals)	
Legally binding signature according to the commercial register, articles of incorporation or equivalent documents or power of attorney form	
Signature	

Town	Date
First name and last name (in block capitals)	
Legally binding signature according to the commercial register, articles of incorporation or equivalent documents or power of attorney form	
Signature	

Please send the completed and signed form together with copies of identification documents to:
Swisscard AECS GmbH, Postfach 227, 8810 Horgen



1. Appointment of Corporate Authorized Persons

The company shall authorize the above-mentioned natural persons (“**Corporate Authorized Persons**”), each individually, to represent the company vis-à-vis Swisscard AECS GmbH (“**Swisscard**”) until further written notice, in connection with the above-mentioned

- basic account agreements (including the related card agreements and application procedures)
- master control accounts (including the basic account and card agreements managed thereunder and application procedures).

The Corporate Authorized Persons may, in the name of and with effect against the company issue declarations of intent and information, make queries, and take delivery of messages from Swisscard

2. Relationship with General Terms and Conditions

The General Terms and Conditions of Swisscard for the basic account agreement/card agreements (“**GTCs**”) shall also apply to the Corporate Authorized Persons, unless stipulated otherwise in these terms and conditions of powers of attorney.

3. Scope of powers of attorney depending on the communication channel

3.1 Communication by post and/or by telephone

The rights of representation of the Corporate Authorized Persons are **comprehensive; in particular, each Corporate Authorized Person may make changes pursuant to clause 5 with individual signing authority** (e.g. appointing new Corporate Authorized Persons, revoking powers of attorney of other Corporate Authorized Persons).

3.2 Communication by e-mail

Corporate Authorized Persons may use the above-mentioned specified e-mail addresses **exclusively**:

- to order copies of card account and basic account statements
- to change the addresses of employees and of the company
- to change cardholder data unrelated to the agreement (Employee ID, cost center)
- to communicate changes in the company name¹
- to increase or decrease limits on card accounts and basic accounts.
- to order replacement cards
- to order PIN codes, which are delivered by post
- to submit evidence of payments and ask for cards to be unblocked on that basis
- to terminate basic accounts and card accounts
- to cancel direct debit procedures for basic accounts and card accounts
- to move card accounts from one basic account to another basic account of the same company.²

Swisscard will reply to such e-mail requests at its sole discretion either by sending an e-mail to the above-mentioned e-mail address indicated or by another communication channel chosen by Swisscard. E-mail requests will be processed during normal office hours at Swisscard’s registered office.

The e-mail addresses of all persons who are authorized to send or receive e-mails in the name and by order of Swisscard are structured as follows: _____@swisscard.ch. **Swisscard may restrict or discontinue communication by e-mail at any time** (e.g. depending on the security of the communication channel). The Corporate Authorized Persons and the company hereby acknowledge the following, in particular:

- e-mail must not be used to send urgent orders/queries to Swisscard, which must be addressed to Swisscard by telephone instead;
- it is prohibited to send any sensitive account or card data (e.g. card numbers, expiration date or card verification number) or means of identification (e.g. PIN, security code) to Swisscard.

In all other respects, e-mail communications (e.g. information exchanges) between Swisscard and the Corporate Authorized Persons are governed by the provisions of the GTCs on electronic communications.

4. Identity check and doubts about the authorization of the Corporate Authorized Person

Swisscard is under no obligation to further check the identity of the Corporate Authorized Person in the following cases:

- e-mails that are received from the above-mentioned e-mail addresses;
- calls in which the caller uses the Security Code specified by the company.

In all other cases, Swisscard shall verify the identity of the Corporate Authorized Persons in an appropriate manner. If Swisscard doubts whether a Corporate Authorized Person is duly authorized, it is entitled to refrain from executing the orders of the Corporate Authorized Person in question and to withhold any information. If Swisscard refuses orders or refrains from exchanging any information, it is not required to state any reasons. Swisscard reserves the right at any time to demand a consultation with or written instructions from legally valid company representatives entered in the Commercial Register. Swisscard may demand authenticated or officially certified signature specimens from the company.

5. Modification (revocation/change of existing powers of attorney and granting of additional powers)

The company may revoke a power of attorney by giving Swisscard written notice thereof (by post or via a change request form). Swisscard may communicate with the relevant Corporate Authorized Persons and process their orders for up to three working days after receipt of such notice.

The Company may change existing powers of attorney or grant new powers of attorney by submitting a new, duly signed **change request form** by post or in any other manner stipulated by Swisscard.

6. Duties of care

The Company shall promptly inform Swisscard whenever Corporate Authorized Persons exit the Company. In all other respects, the duties of care under the GTCs are applicable.

7. Data protection

The data of the company, of the cardholder and of the Corporate Authorized Persons shall be processed in accordance with the GTCs. Further information about data processing is available in the Privacy Policy, the latest version of which can always be viewed at www.swisscard.ch/dataprotection or requested from Swisscard.

8. Corporate Group

By special agreement with Swisscard, group companies of a corporate group may appoint one Corporate Authorized Person for multiple group companies.

9. Indemnification and liability, change of terms and conditions of powers of attorney, as well as jurisdiction and applicable law

The provisions in the GTCs shall apply.

09/2023

¹ So long as no change is made in the company number in the Commercial Register. (not applicable to restructuring operations such as mergers, asset transfers or demergers)

² The prerequisite is that nothing can change in the card account information other than the basic account numbers related to the card account.

