

Letter of Authority To be signed by client and completed by bank.

Private and Confidential

To Bank _____
Address _____

Please complete this form fully and send it directly to THE GUARANTEE TEAM at the address overleaf and discuss the information provided with them if necessary.

Signature of Client _____
For and on behalf of _____

The following sections are to be completed by your bankers

A. In what name is
The Account(s)? _____

B. What are the authorised Limits in respect of:
1. Overdraft _____
2. Term Loan _____
3. Guarantees _____

When is next Review Date? _____

Has the Bank granted all the facilities applied for in the last three years? Yes No

Is the bank fully satisfied with the account holders operation of these accounts? Yes No

C. Please list fully the security held (use separate schedule if necessary) against these facilities:

D. What is the present balance on the Account(s)?
(a) Current A/C(s) _____
(b) Deposit A/C(s) _____
(c) Term Loan A/C(s) _____
(d) Undischarged Guarantees _____

- E. What were the maximum and minimum monthly balances on the account in the last calendar year and the current year to date? Where the client operates more than one account (current, deposit, loan) please let us have details separately for each.

Please indicate clearly whether balances are debit or credit, and the currency used.

	Year _____		Year _____	
	Maximum	Minimum	Maximum	Minimum
January	_____	_____	_____	_____
February	_____	_____	_____	_____
March	_____	_____	_____	_____
April	_____	_____	_____	_____
May	_____	_____	_____	_____
June	_____	_____	_____	_____
July	_____	_____	_____	_____
October	_____	_____	_____	_____
November	_____	_____	_____	_____
December	_____	_____	_____	_____

- F. What was the turnover i.e. total of Bank Lodgements for:

1. Last Calendar Year? _____
2. Current Year to Date? _____

Signed _____
 Authorised bank official

Telephone _____ Fax _____ Email _____

Date _____ Bank Stamp _____

**Guarantee Team
 Affinity Insurance Brokers
 Ardeen House
 Marine Terrace
 Dun Laoghaire
 Co Dublin**

**Phone +353 1 2801057
 Fax +353 1 2842346
 Email info@affinityinsurance.ie**