

BROKERAGE AGREEMENT NO. _____

Done in Tallinn on _____

_____ (hereinafter: Client), registry code/personal identification code 12904037,

seat/place of residence: _____

mailing address: _____

represented by _____

Contact persons _____

Bank account No. _____

Telephone: _____

E-mail: _____

and

OÜ Avor Kindlustusmaakler (hereinafter: Avor), registry code **11730724**

seat and registered address: **Vabaõhumuuseumi tee 4C-35, Tallinn 13522**

represented by **Kalmet Kala**

Bank accounts **EE602200221047583000** Swedbank and **EE691010220106659015** SEB Pank

Tel.: **+372 662 8556**

Fax: **+372 662 8557**

E-mail: info@avor.ee

Web site: <http://www.avor.ee>

have entered into this brokerage agreement (hereinafter: Agreement) as follows:

1. Avor shall provide insurance brokerage services to the Client for the following classes of insurance:
all classes of insurance
2. The Agreement consists of this brokerage agreement, the information sheet available [here](#), the [Terms and Conditions for Brokerage Agreement](#) of OÜ Avor Kindlustusmaakler, and the letter of authority [here](#) .
3. By signing the Agreement, the Client confirms that he has examined, fully understood and accepts all contractual terms and conditions.

Avor Kindlustusmaakler OÜ
Kalmet Kala