

## LETTER OF AUTHORITY

Annex to Brokerage Agreement No. \_\_\_\_\_

\_\_\_\_\_, registry code/personal identification code

\_\_\_\_\_,  
seat/place of residence:

mailing address: \_\_\_\_\_

represented by \_\_\_\_\_

Contact person \_\_\_\_\_

Bank account No. \_\_\_\_\_

Tel.: \_\_\_\_\_

E-mail: \_\_\_\_\_

hereby authorises **OÜ Avor Kindlustusmaakler** (registry code: \_\_\_\_\_)

to represent itself/himself vis-a-vis insurers, insurance brokers and any other parties for the purposes of entering into insurance policies for the following classes of insurance:

\_\_\_\_\_

and, in that connection, conduct the following operations:

- submission of insurance applications
- requesting of insurance offers
- receiving, collecting and transmitting insurance policy documents, information, data and notifications
- amending, withdrawing and cancelling insurance policies
- receiving of insurance premiums
- handling other insurance matters

The letter of authority remains valid as long as the brokerage agreement is in force.

\_\_\_\_\_

Client