

Customer Authority Forms for an HSBC Account

To add an HSBC account to The BankLink Service you need to complete two forms – the usual BankLink one, and a separate HSBC form. To make it easier BankLink has combined the two, so that when you complete the details below, they are populated correctly on both forms.

Follow these steps to sign an HSBC account up to The BankLink Service:

- 1. Complete the details below to ensure that all the spaces on the attached authority forms are correctly filled out
- 2. Print the forms out
- 3. Sign and date the BankLink Customer Authority, and page two of the HSBC form
- 4. Keep this page for your records and send the forms to your accountant

Bank Account Name (A	account Title)		Service Start Month and Year
Bank and Branch			
Sort Code	Account Number		Client Code/Cost Code
Account Signatories (p	lease enter full names)		
Service Frequency:	Monthly	Weekly (where available)	Daily (where available)
Please supply the	account above as a Prov	isional Account if it is not availa	ble from the bank
Address Line 1			
Address Line 2			
Address Line 3			
Address Line 4		Postal Code	
Practice Name			Practice Code
riactice Name			Practice Code

	SankLi		imited)		Send completed form to: BankLink 9 Devonshire Square London EC2M 4YF			
Nam	e of Account					Client Code		
Acco	unt Number					Cost Code		
	BANKLINI	CUST(OMER AU	THORITY	7			
To:	The Manager,					Med	General Manager, ia Transfer Services UK Limit nkLink")	ed
	(Bank) ("the Bank")		(Branch)					
1.	I/We hereby AUTHO	RISE the Bank and	l BankLink (acting as a outer readable or any	a data processor) as other format) relatii	at and from the	first of ks account/s design	20 to forward all nated above to each other and	
	("my/our advisors")					Practice Code		
2.	Zealand and Australi understand that my/	a) for the purpos our personal data BankLink services	es of BankLink and its a will be kept secure a	s service partners pr and confidential and	cocessing my/our that BankLink w	data in order to pr ill not pass my/our	ed outside of Europe (includi ovide the BankLink services. details to third parties other ad policy can be found at:	I/We
3.	responsibility fo b) neither the Banl processing erro advisors and wh and/or BankLin	nership, joint ven or the actions of I k nor BankLink w rs or any other m nich occur for rea	BankLink, my/our adv ill, subject to any pro- latter or thing arising sons beyond the cont y, severally or jointly a	visors or any other the hibition or limitation out of this authority arol of respectively the	hird party; n imposed by law y or any agreeme he Bank or BankI	, be liable for delay nt which the Bank o ink, as the case ma	nkLink and that the Bank acc rs, non-performance, failure to or BankLink may have with m y be, nor will the liability of t any special, indirect or consec	o perform y/our he Bank
4.		customer is a cor	mpany or LLP a resolu				r authority form. I/We confir te terms of this customer aut	
5.	I/We CONFIRM and a aforegoing Account(s		tomer authority form	ı does not in any wa	y limit or affect t	he existing authorit	ties to the Bank for operation	s on the
6.							on referred to above, and that o do so without notice to me,	
7.							n to me/us on any grounds th nk shall be entitled to suspen	
8.	Any revocation of thi	s authority by m	e/us will not take effe	ect until 14 days afte	er written notice	of the revocation is	received by the Bank from m	e/us.
	By signing below:							
			ta being used as detai d BankLink to act in a	,	-		ve.	
			u banklink to act in a		customer author	ity form.		
	(Account signatory)						(Account sign	 atory)
	,							
	(Witness)						(NA)	tness)

Accounts and Services Amendment Schedule





For Bank Use Only: CIN	
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Customer Details	Agreement Authorisation	
• Full Customer Name • Address	and Services Schedule shall be amended in accordance	ween the Customer and the Principal Bank and confirm that the Accounts ce with the attached Accounts and Services Schedule and that the Terms and Conditions attached (if any) which shall be deemed to form part of out below.
7 Address		out below.
	Signed for and on behalf of the Customer • Full Name in BLOCK Letters	Full Name in BLOCK Letters
	• Job Title	Job Title
• Postal Code	Signature of Authorised Representative	Signature of Authorised Representative
Principal Contact		
	• Date	Date
		e HSBC <i>net</i> Amendment Schedule
	If you would like to receive confirmation about the contact person(s) here:	ompletion of the amendment, please specify

E-mail address 1

E-mail address 2

Amendment reference

• Indicates mandatory field

Customer Associate

This Customer Associate section should be completed for each separate legal entity whose accounts will be reported on HSBC*net* for the Customer to access. You may copy this section if you have more than one Customer Associate.

Customer Details

Full Customer Name	
Principal Bank (ie Customer's Bank)	

Customer Associate Details

Enter the Full legal name of the customer associate whose accounts are to be loaded to the customer's HSBC*net* portfolio

Customer Associate Name	
Address	
Postal Code	

Customer Associate Letter of Authority

To: Principal Bank

From: Customer Associate

Full Name in BLOCK Letters

Account Holding Bank(s) (named on the Customer Associate Accounts and Services Schedule)

The Customer has entered into an agreement with the Principal Bank (the 'Customer Agreement') under which the Customer may use the HSBC*net* system from time to time (the 'System') to access, view'on certain bank accounts. We have appointed the 'Customer as our agent to access our accounts defined in the attached Accounts and Services Schedule, any other accounts referred to in 'Clause 13.1 of the Customer Agreement, or such other accounts as may be notified to you by the Customer Ocustomer Associate from''ko g''q''ko g''kj g''-Ceeqwp wh'hp" accordance with this Customer Associate Letter of Authority.

- 1. We hereby authorise the Principal Bank and the Account Holding Bank to provide the Customer with access to the Accounts, in accordance with this Customer Associate Letter of Authority.
- 2. We confirm the Customer is entitled to view on and use the other services available via the System from time to time in relation to the Accounts. We confirm the Customer is entitled to agree, on our behalf, applicable terms from time to time, relating to the access and use of the Accounts.
- 3. We represent and warrant that we have full legal and corporate authority to appoint the Customer for the purposes stated herein.

We shall be bound by all actions of the Customer taken in respect of the Accounts and shall ratify and confirm all things done by the Customer on our behalf in accordance with the purposes stated herein.

The appointment of the Customer shall remain in full force and effect until the day following seven days after the Principal Bank receives written notice of revocation, signed by our authorised signatory or signatories, or until termination of the appointment of the Customer by operation of law.

We have taken all necessary action to authorise the entering into of this Customer Associate Letter of Authority, the person(s) who sign below have been duly authorised to sign this Customer Associate Letter of Authority, and the Customer Associate Letter of Authority and such authorisations are in accordance with the applicable constitutional documents of the Customer Associate. This Customer Associate Letter of Authority is governed by and will be construed in accordance with the Governing Law set out in the section entitled Principal Bank and Governing Law. The parties irrevocably submit to the non-exclusive jurisdiction of the courts of that named jurisdiction in respect of any proceedings which may be initiated in connection with this Customer Associate Letter of Authority.

Signed for and on behalf of the Customer Associate

Full Name in BLOCK Letters

Job Title		Job Title
Signature of Authorised Representative	_	Signature of Authorised Representative
Date		Date

For Bank Use Only: CIN	

Customer Associate Accounts and Services Schedule

Customer Associate Name			Tick one of the following options. Print additional pages if your require more than one type of amendment.			
Please enter the name of the account holding bank for the accounts listed below. You may copy this page if you have accounts with more than one bank.			If you wish to ADD the accounts listed below to your HSBC <i>net</i> profile, please tick this box			
Account Holding Bank Please indicate below which of your accounts you wish to make available through HSBCnet and for which Services. Account Details			If you wish to CHANGE the services available on the accounts listed below, please tick this box If you wish to DELETE the accounts listed below from your HSBCnet profile, please tick this box If you select 'Change', the services specified will supersede the existing services entitlement for the relevant accounts. Services			
Country/Bank/Branch Name	• Bank Code	Account Number	• Currency •	Account Title	BTR	

Note: Please cross through any unused boxes

For Bank Use Only: CIN	

▶ Relationship Manager Sign Off – For Bank Use Only

				<u> </u>				
Custome	er Name				Authorisation: I confirm that:			
CIN Nu	mber				The agreement and any/all Customer	er Associate Letters of Authority hav	re been signed in accordance	
Customer Type GBFI/GBCO/GBMN/GBPS/GBMS/CMBB/ CMBM/CMCB/CMCM/CMCS/CMMS (Delete as appropriate)				(Delete as appropriate)	with the customers' respective bank mandates and HSBC <i>net</i> signing rules • All required KYC Checks have been completed			
Sales M	anager				The limits stated in this section have	ve been approved/sanctioned and are	to be placed on HSBCnet	
					GTE/SDC Omnibus Counter Ind	emnity and associated Facility Letter i	is in place (tick if applicable).	
Limits					RM Signature			
Approve	ed daily B	ACS limit	£		Print Name			
	ed daily Pri y Transfer/	iority Payme Daylight	ents/		Date			
Overdra	ft limit		£		RM Location/Sort Code			
STC lim		- only appl	£ icable for STC clients		RM Telephone Number			
Sterling	and Currei	ncy Limits	ressed in all currencies where the customer h	os an account and has requested	Telephony Training			
payment	functional	ity. Each cur	rency net debit limit may be equal to but not nsfer/Daylight overdraft limit. Use the bank'	more than the Approved daily	Training Visit			
Curr	ency Code		Net Debit Limit			E-GTE/SDC Fee	£	
G	В	P			Standard Tariff	E-trade Monthly Fee	£	
					Restricted Tariff	Set-up Fee	£	
					N.B. (Please complete the invoicing information, default pricing will app		cable, in the absence of	
					Billing Account (sort code-account nu	mber)		
Get Rate	e Supplem	entary Det	ails					
New cust	tomer to H	SBC?		Yes No	Billing Address: As per page 1			
Number (of foreign	exchange pa	ayments per annum		DM C. I	C.1. W C.1		
Average	size of for	reign exchan	nge payment £		RM Code	Sales Manager Code		
Get Rate	e Limits							

Daily Transaction Limit
(within Daily Priority Payment Limit) – Cannot exceed GBP500,000

A foreign exchange payment is any payment sent in a currency which is different to the currency of the account from which it is made eg a GBP payment from a euro account or a euro payment from a US dollar account.