

**BNYM Transfer Agency Online Authorised User Request**

**Investor Name and Account Number:**

Please specify below the authorised users' names and contact details. By signing this form you confirm that the authorised users have full authority to access BNYM Transfer Agency Online, to enter into the BNYM Transfer Agency Online terms and conditions (the "**Terms**") on behalf of the <insert type *Distributor or Corporate Investor*> and to bind the <insert type *Distributor or Corporate Investor*> to the Terms.

Attach an additional sheet if there is insufficient space to include all authorised users.

<b>Authorised User names</b>	
Name: Job title/position: Contact No: Email address: Dealing or Read Only Access:	
Name: Job title/position: Contact No: Email address: Dealing or Read Only Access:	
Name: Job title/position: Contact No: Email address: Dealing or Read Only Access:	
Name: Job title/position: Contact No: Email address: Dealing or Read Only Access:	
Name: Job title/position: Contact No: Email address: Dealing or Read Only Access:	

This form must be signed on behalf of the Corporate Investor by two authorised signatories

**SIGNED** by [●], authorised signatory, duly authorised for and on behalf of [**Corporate Investor's name**]

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SIGNED** by [●], authorised signatory, duly authorised for and on behalf of [**Corporate Investor's name**]

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

