

LETTER OF AUTHORITY

To: _____ Bank: _____

Please complete this form fully and send it directly to **Advent Risk Management Limited** at the address at the end of this form and discuss the information provided with them if necessary.

Authorised Signatory : _____

For and on behalf of account holder : _____

THE FOLLOWING SECTIONS ARE TO BE COMPLETED BY THE BANK

(A) What is the present balance on the account (s) ?

Current Account : _____ Deposit Account : _____

Term Loan Account : _____ Guarantees & Bonds : _____

(B) In what name is the account (s) ? _____

(C) What are the authorised limits in respect of : Please list all security held against these facilities.

- Overdraft _____
- Term Loan _____
- Guarantees & Bonds _____

When is next review date ? _____

Has the Bank granted all facilities applied for in the last three years ? Y / N

(D) What were the maximum and minimum monthly balances on the account in the last calendar year and the current year to date ? Where the customer operates more than one account (current, deposit, loan) please provide details separately for each. Please indicate **clearly** whether balances are DEBIT or CREDIT.

20__ 20__

	Max	Min	Max	Min
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				

E) What was the turnover i.e. total of bank lodgements for :

(1) Last calendar year _____ (2) Current year to date _____

Signed and Stamped for bank: _____ Date : _____