Letter of Authorisation

351 Braddell Road #01-03 Singapore 579713
Tel: 62741212 ● Email: info@nets.com.sg ● Website: www.nets.com.sg

1. ACCOUNT DETAILS

Company Name:	Business Registration Number:	Date of LOA submission:

2. AUTHORISED REPRESENTATIVE DETAILS – Please complete the table below

I / We hereby nominate the below-mentioned person(s) as Authorized Representatives to execute the activities as stated below (Authentication designation):
- Apply for New Terminals / New Products or Services
- Submit Change Request
- Terminal Retrieval arrangement

This instruction will supersede all previous nomination instructions given.

Note: A clear image of each Authorized Representative's ID (front and back), certified as a true copy by any of the following persons is required to be provided together with this LOA:
- Lawyer
- Notary Public
- Certified Public or Professional Accountant
- Auditor

Full Name (as per NRIC)	Designation	NRIC	Multiple Nationalities (if any)

3. DECLARATION

By signing below, I / We hereby:-
- Confirm that NETS will not be liable for any loss and liabilities of whatsoever nature suffered by us in connection with or arising from the confirmations by any of the Authorized Representatives to NETS and/or NETS reliance on such confirmations.
- Agree to indemnify NETS and at all times keep NETS fully indemnified from and against all actions, cost (including but not limited to all whatsoever legal costs and expenses howsoever incurred), claims, losses and all other expense and liabilities of whatsoever nature which may be made against NETS or incurred or suffered by NETS in connection with or arising from the above confirmations by any of the Authorised Representatives to NETS and/or NETS reliance on such confirmations.
- Agree that all verbal confirmations made by any of the Authorised Representatives shall be conclusive and binding on us.
- NETS reserves the right to reject the request without having to furnish any reason of doing so.
- The Authorised signatory (ies) or approved person(s) shall give NETS not less than (7) business days for this authentication to take effect.

Name: NRIC: Date: Signature of Authorised Signatory:	Name: NRIC: Date: Signature of Authorised Signatory:	Name: NRIC: Date: Signature of Authorised Signatory:

FOR INTERNAL USE ONLY

Attended By MA		Approved By MA		Maker (MO)		Checker (MO)	
Name:		Name:		Name:		Name:	
Date:		Date:		Date:		Date:	
Signature:		Signature:		Signature:		Signature:	