**Sample Authorisation Letter**

**Instructions**

Please print the second page of this authorisation letter on the company's letterhead. The authorisation letter has to be signed by the authorised signatories recorded on the business register.

Register for the user account on the homepage of the zseLEI Service website.

Upon registration, apply for LEI issuance and upload the authorisation letter.

When changing user data, please send the completed and certified authorization form to the email address lei@zse.hr.

Please note that it is not required to provide the original copy by post.

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#### **Authorisation Letter for submitting a request for LEI issuance (multiple funds) and administration of user data**

Dear Sir or Madam,

We hereby authorise the following person to apply for LEI on our behalf, including the maintanance of the related data.

**Legal Entity details:**

|  |  |
| --- | --- |
| ***Legal Entity name (Fund Management Company)*** |  |
| ***Address*** |  |
| ***City and ZIP code*** |  |
| ***Country*** |  |

**Authorised person's details:**

|  |  |
| --- | --- |
| ***First name*** |  |
| ***Last name*** |  |
| ***E-mail*** |  |
| ***Phone*** |  |

By signing this authorisation letter, the authorised signatories:

i) Hereby confirm they are authorised to sign the authorisation letter.

ii) Have read and hereby accept the General Terms and Conditions of zseLEI Service

**Place and date:** ......................................................

|  |  |
| --- | --- |
| ..........................................................  **First signatory** | ..........................................................  **Second signatory** |
| ...........................................................  **First name, Last name** (print) | ...........................................................  **First name, Last name** (print) |
| ...........................................................  **Position** | ...........................................................  **Position** |

**Corporate seal:**

**List of funds under our management to which this authorization letter applies:**

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Fund name** | **Fund identificator in the registry** | **Name of the Competent Authority where the fund is authorized** |
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