INTERBANK ARUBA N.V.

SEYF 1887

Date: .....

The Manager
Interbank Aruba N.V. Ltd

.....

Dear Sir/Madam,

Re: Registration to Email Facility Service - Joint Accounts

We shall be grateful if you will send all our statements and advices pertaining to the accounts listed in **SECTION B** to the e mail address/es* specified below:

Customer Number(1): ..... E-mail address:

(Maximum 35 characters)

Customer Number(2): ..... E-mail address:

(Maximum 35 characters)

Note: Any existing email address in our records shall be replaced by the above email address to convey your statements/advices related to your accounts.

Consequently,

It is understood that, upon approval of our request, issuance of paper statements and advices for the accounts specified below shall be discontinued.

It is further understood that certain types of documents are subject to regulatory or legal requirements, and are bound to be sent to me in hard copy, and I undertake not to hold the bank responsible for receiving such paper documents.

We hereby declare that we are aware of the risks inherent to the emailing of the documents referred to above including but not limited to, documents being sent to impersonated e-mail addresses and/or wrong recipients and thereby becoming known to third parties, and we agree to bear the consequences thereof.

SECTION B

Savings/Current Account

Savings/Current Account

Fixed Deposit Account

Loan Account

Credit Card

Trade Finance & Bank Guarantee Contracts

We shall be responsible for updating the designated e-mail address(es) details with the bank as and when necessary.

We further undertake to hold the Bank and/or any of its agents harmless against claims or demands arising from the execution of the present instructions and undertake not to enter any action against the bank and hereby irrevocably renounce to any rights we may have accordingly.

The present authorisation shall remain valid until **written** revocation by us is received and acknowledged by the Bank.

Yours faithfully,

(S) .....

Name: .....

NIN/Valid Passport Number:

(S) .....

Name: .....

NIN/Valid Passport Number:

FOR BANK USE ONLY	
TO BE COMPLETED AT RECEIVING BRANCH/BU	
Customer Numbers:	
Signatures Verified by:	Processed by:
(S)	(S) .....
Name:	Name: .....
Date:	Date: .....

OCT 2013