APPLICATION TO ACCESS EOLIS

EULER HERMES ONLINE INFORMATION SERVICE

Version 1.0

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1. Fill in the form - state policy number, name of user(s), email address(es), date and name of policy holder

Policy holder:

2. Print the form

Policy no.:

- 3. Supply form with company stamp and signature
- 4. Send the form via email to contact.se@eulerhermes.com or via post to Euler Hermes Sverige

We, the Policyholder, hereby a	oply to access EOLIS on beho	ılf of the following persons:						
Name (user)		Email address						
		parate Access Agreement for this greement upon when first logging						
Place and date:								
Name of policy holder:								
		The signed form shall be sub	mitted to: Euler Hermes Sverige,					
Authorised signatory and clari	ication of signature	Box 729, SE-101 34 Stockholm or contact.se@eulerhermes.com						

Contact Euler Hermes

Euler Hermes Sverige filial Sveavägen 98 Postadress: Box 729 SE-101 34 Stockholm Tel.: +46 8 555 136 00 contact.se@eulerhermes.com www.eulerhermes.se BNP Paribas: 9470-0024250 Bankgiro: 5974-5463 Registrerat i Bolagsverkets filialregister Org.nr.: 516407–6233 Euler Hermes SA Avenue des Arts 56 BE-1000 Bryssel

Reg.nr.: 0403.248.596 RPM Bryssel Försäkringsbolag registrerat enligt kod 418

EHI EULER HERMES