Bank of Ireland

FOR BANK USE ONLY				
ACCOUNT NUMBERS	NSC]	
A/c No. 1.	A/c No.2.		A/c No. 3.	
Business Account Mandate and	d Data Protectior	n Consent Fo	rm	
Mandate				
To: The Governor and Company of the Bank of Ire	eland ("The Bank").			
Brand		anch		
	Da	ate DD	ΜΥΥ	
I, the undersigned, having read and understood the Conditions (if applicable), the Terms of Business, th Charges hereby authorise you to open and/or cont	ne Schedule of Fees and C	harges for Business	Customers, the Schedu	le of International Transaction
			F	please use BLOCK CAPITALS
				specimen signature
of which I am the sole proprietor and to charge to to act on instructions relating to the accounts, sign			/ notes, bills, withdrawa	al forms, and other orders and
			Ĩ	please use BLOCK CAPITALS
				specimen signature
Current Account to be overdrawn or any overdraft employees and agents, against any and all deman put to by reason of (a) accepting the instruction of	ds, claims, liabilities, losses	s, damages, costs ar	d expenses which it or	any of them may incur or be
given in consideration of the Bank obeying my/our The account holder and the authorised signatory a changing of the account name, the account statem I hereby agree, that this mandate shall remain in full	instruction given in this ma cknowledge that the Bank tent address or the closing	andate. will not accept instru of the account	ctions from the authoris	sed signatory in relation to the
The account holder and the authorised signatory a changing of the account name, the account statem	instruction given in this ma cknowledge that the Bank tent address or the closing	andate. will not accept instru of the account	ctions from the authoris	sed signatory in relation to the
The account holder and the authorised signatory a changing of the account name, the account statem I hereby agree, that this mandate shall remain in full	instruction given in this ma cknowledge that the Bank nent address or the closing force and effect until an am eing asked to supply, being or which the Bank of Irelar ed for this purpose, please you to stop or change the p	andate. will not accept instru- of the account nending Mandate (on g used to provide me nd Group has arrang e tick this box	ctions from the authoris banks standard form) sh /us with information abo ed for me/us with a third	sed signatory in relation to the nall be communicated to you.

- disclosing to each other any material misstatement of fact contained in applications by me/us for financial services;
 (e) to manage and administer my/our accounts or policy/policies of insurance on an ongoing basis; for on-going credit review and analysis; to the disclosure of information and/or documentation to a prospective or actual assignee; to the disclosure of information and/or documentation to any other party in connection with a loan transfer and securitisation scheme;
- (f) where I/we hold a mortgage with the Bank/Group, I/we consent to the use of my/our data for the purposes described in the mortgage application, loan offer and mortgage documentation;
- (g) to hold, use, disclose and process my/our data for any other specific purposes where I/we have given the Bank/Group my/our specific consent to do so;
 (h) for disclosure or transfer of my/our data abroad by only for any of the purposes specified above, to persons who have been approved by the Bank and/or the Group, and in a manner compliant with applicable data protection legislation.

In this Authorisation, the following terms have the following meanings; the "Bank" means The Governor and Company of the Bank of Ireland (which included Bank branches); the "Group" means any and all of the separate legal entities that comprise the Bank of Ireland Group; my/our "data" means all and any information which has been provided or will be provided to you, whether by me/us or by a third party, including in any application forms; provided in further meetings and discussions with you; ongoing transaction data in respect of my/our accounts and relationships with the Bank/Group: or other such data.

Business Account Mandate and Data Protection Consent Form

Data Protection (continued)

- 5. In the event of a Facility being approved, I/we authorise you to make the Facility available and to put the appropriate repayment schedule into effect.
- 6. I/we agree that the Facility (and any other facilities as may be granted by you at your discretion) shall be subject to the terms and conditions and specific provisions detailed in your Credit Agreement, once issued.

The Sole Trader and any other authorised signatory must sign below.

Date DD MM YY	
Signature(s):	
1. Sole Trader Name (BLOCK CAPITALS)	
Signature	
2. Other Authorised Signatory Name (BLOCK CAPITALS)	
Signature	
Address of Authorised Signatory	
Irish resident Yes No	Authorised Signatory - Date of Birth
Witness Name (BLOCK CAPITALS)	
Signature of Witness	
Date	D D M M YY
Witness Occupation	