

AUTHORISATION FORM

We refer to the Request of Service, General Condition Part I and Part II ("**Membership Agreement**") and Euronext Clearing Regulations and Instructions (hereinafter jointly the "**Regulations**"), currently in force between Euronext Clearing and your company. Terms and expressions used in this Form shall have the meaning given to them in the Membership Agreement and/or in the Regulations where relevant, unless otherwise defined in this Form.

We undersigned _____
(hereinafter "**Clearing Member**") admitted to Euronext Equity Section and/or Euronext Derivatives Section hereby,

AUTHORIZES

Cassa di Compensazione e Garanzia S.p.A. ("hereinafter "**Euronext Clearing**") to (tick the appropriate box(s)):

send instructions to Euronext Securities Oslo on behalf of the Clearing Member or its Settlement Agent named [_____] on financial instruments recorded in the book entry system of Euronext Securities Oslo;

send payment instructions to Clearing Member or its Paying Agent named [_____] in order for them to send directly to Norges Bank for Variation margins, Premiums, options cash settled amounts in NOK;

send instructions in equity resulting from exercise/assignment and futures expiry to the cash market to Clearing Member named [_____] (to tick only in case the Clearing Member is not also member of Euronext Equity Section).

Place and date:

(Signature of the Legal/Contractual Representative of the **Clearing Member**)



This Form must be digitally signed and returned to the Euronext Clearing Client Services & Onboarding Department at the following address: ccp-readiness@euronext.com

Any modification this Form must be send well in advance in respect of the effective date to Euronext Clearing together with an updated version of this Form.