

With respect to policies granted by OP Life Assurance Company, applicable only to life and unemployment policies included in Extrasure contracts.

Grantor	Name		Personal ID code																				
	Telephone	Email address																					
Attorney	Name		Personal ID code																				
	Osoite	Postal code	Town/city																				
	Telephone	Email address																					
Authorisation	<p>Matters related to insurance policies (can be authorised by policyholder)</p> <p>Choose one of the two options in each of the items below</p> <table border="0"> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May request offers and information on existing insurance cover</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May make changes to insurance cover</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May cancel insurance policies</td> </tr> </table> <p>Select the insurance lines to which the above authorisation applies</p> <table border="0"> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage Pohjola Insurance's life insurance matters (eg accident, illness/medical expense)</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage OP Life Assurance Company's life and disability insurance policies included in Extrasure</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage Pohjola Insurance's travel insurance matters</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage property insurance matters (home, holiday home, valuables, boat/yacht, forest, animals)</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage vehicle insurance matters (motor liability insurance and motor vehicle insurance)</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage matters related to other insurance policies</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage matters related to other insurance policies</td> </tr> </table> <p>Please specify policies</p>			<input type="checkbox"/> May not	<input type="checkbox"/> May request offers and information on existing insurance cover	<input type="checkbox"/> May not	<input type="checkbox"/> May make changes to insurance cover	<input type="checkbox"/> May not	<input type="checkbox"/> May cancel insurance policies	<input type="checkbox"/> May not	<input type="checkbox"/> May manage Pohjola Insurance's life insurance matters (eg accident, illness/medical expense)	<input type="checkbox"/> May not	<input type="checkbox"/> May manage OP Life Assurance Company's life and disability insurance policies included in Extrasure	<input type="checkbox"/> May not	<input type="checkbox"/> May manage Pohjola Insurance's travel insurance matters	<input type="checkbox"/> May not	<input type="checkbox"/> May manage property insurance matters (home, holiday home, valuables, boat/yacht, forest, animals)	<input type="checkbox"/> May not	<input type="checkbox"/> May manage vehicle insurance matters (motor liability insurance and motor vehicle insurance)	<input type="checkbox"/> May not	<input type="checkbox"/> May manage matters related to other insurance policies	<input type="checkbox"/> May not	<input type="checkbox"/> May manage matters related to other insurance policies
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	<p>Matters related to damage and loss (may only be authorised by the claimant)</p> <table border="0"> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage all damage and loss matters</td> </tr> <tr> <td><input type="checkbox"/> May not</td> <td><input type="checkbox"/> May manage a specific type of damage or loss, please specify</td> </tr> </table> <p>Claims code</p>			<input type="checkbox"/> May not	<input type="checkbox"/> May manage all damage and loss matters	<input type="checkbox"/> May not	<input type="checkbox"/> May manage a specific type of damage or loss, please specify																
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	<p>The grantee has the right to receive information related to the grantor necessary for managing a claim and otherwise regarded as confidential (for example information on health status).</p>																						
	<p>A power of attorney will remain effective until the insurer is notified of its termination in writing.</p>																						
Signature	Place, date and the signature of grantor (or legal grantor is a minor) and name in print/block letters																						

Return this power of attorney to your local Group member bank or by post to the following address (postage paid)

Pohjola Vakuutus Oy  
Tunnus 5010454  
00003 VASTAUSLÄHETYS

## Power of attorney for managing insurance and damage and loss matters

You may use the enclosed power of attorney to authorise another person to manage your insurance policies and/or claims. You as policyholder may issue such an authorisation to manage insurance matters and your personal claims. However, the attorney may not give a health declaration required for personal insurance or issue a beneficiary clause on your behalf.

You may issue a power of attorney for managing claims if you are the claimant. In personal insurance, the insured person or the injured person can be a claimant. You may authorise another person to manage a specific claim or several claims and to obtain the required information that is otherwise kept confidential.

Please note that, within the scope of the power of attorney, your authorisation provides the attorney with the same rights to manage your policies and claims as you have. The power of attorney does not give powers to do transactions on our online insurance services which are subject to a separate power of attorney.

Please fill in the form completely, date and sign it. If the principal is a minor, his legal guardian shall sign the power of attorney. If the form is filled in incompletely, it cannot be approved. You may cancel your power of attorney by informing OP.

A power of attorney signed by the guardian will cease to be effective when the minor comes of age, after which he as an adult must grant and sign a new power of attorney, if necessary.

Please return your power of attorney to any OP Group member bank or send it to the address shown in the form (postage paid).