

Decedent	Full name		Personal identity code
	Date of death		
Authorised representative	Full name		Personal identity code
	Address	Postcode	Town/City
Authorisation	The Authorised representative is hereby authorised to represent the decedent's estate when using banking services provided by OP Financial Group and insurance services provided by and Pohjola Insurance Ltd.		
Banking	For each statement below, please tick one of the two alternatives		
For each statement below, please tick one of the two alternatives	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised, at a branch, to pay bills and withdraw funds from the estate's bank accounts and to terminate and close the estate's bank accounts at a branch.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to redeem funds remitted to the estate, such as a tax refund.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to open new bank accounts for the estate.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to access information on the decedent's bank accounts, loans and other commitments during the decedent's lifetime.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to receive a payment card for the estate's bank accounts.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to use the estate's bank accounts from his/her own OP eServices profile.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to receive pledges on the estate's property held by the bank (such as share certificate, real estate mortgage deed) and to sign documents related to surrender of pledges.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to access information on the decedent's mutual fund units and custody accounts during the decedent's lifetime.	
Saving and Investing	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to enter into the OP Savings and Investments Agreement.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to open new book-entry accounts for the estate.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to agree on investment advice and to fill in an investor profile.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to enter into short-selling.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to trade (buy and sell) in the estate's mutual fund units and securities.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to transfer the estate's mutual fund units and book-entry accounts to an appointed person.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to transfer the decedent's cooperative contribution (name of transferee must be specified):	
	Please note! The transferee must apply for membership within 12 months of the date of death of the deceased member.		
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to determine the account into which the terminated cooperative contribution will be refunded.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to change the account into which the estate's terminated profit shares and member shares will be paid. The terminated shares are to be paid into the following account (account must be specified):	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to access the estate's safe deposit box, terminate the agreement related to the safe deposit box or document custody and receive property held in safekeeping or document custody.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to terminate the estate's securities custodial and management agreements and close any book-entry accounts.	
	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to terminate an OP Savings and Investments Agreement or OP Private Agreement, including related agreements.	
	Pohjola Insurance	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to access information on the decedent's non-life insurance policies during the decedent's lifetime.
		<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to request information on valid insurance cover.
		<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to make changes to insurance cover granted by Pohjola Insurance.
<input type="checkbox"/> Not authorised		<input type="checkbox"/> Authorised to approve new insurance policies granted by Pohjola Insurance.	
<input type="checkbox"/> Not authorised		<input type="checkbox"/> Authorised to terminate insurance policies granted by Pohjola Insurance.	
<input type="checkbox"/> Not authorised		<input type="checkbox"/> Authorised to handle matters related to losses and claims from Pohjola Insurance in which the estate is the beneficiary.	
<input type="checkbox"/> Not authorised		<input type="checkbox"/> Authorised to determine into which bank account compensation paid by Pohjola Insurance is to be paid.	
<input type="checkbox"/> Not authorised		<input type="checkbox"/> Authorised to determine the recipient of compensation paid by Pohjola Insurance.	
<input type="checkbox"/> Not authorised		<input type="checkbox"/> Authorised to determine the method of payment of compensation.	
Other authorisation	<input type="checkbox"/> Not authorised	<input type="checkbox"/> Authorised to conclude some other legal act separately specified herein:	

Principal	If minors or persons otherwise under guardianship are party to the estate, the distribution of the estate's assets will require applying for a permit from the Digital and Population Data Service Agency. The estate's distributees are responsible for applying for the necessary permits and possible substitute guardians from the Digital and Population Data Service Agency. The estate's distributees who have signed this power of attorney are also fully liable for the potential loss caused by distribution of assets without the requisite Digital and Population Data Service Agency permits.			
	Signatures of all of the estate's distributees			
	Date and place	I wish the estate's accounts to be shown in my OP eServices profile	Signature and name in print/block letters	Personal identity code
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
		<input type="checkbox"/> No <input type="checkbox"/> Yes		
	Witnesses	Witnesses are not required if the bank can otherwise ascertain the authenticity of the signatures.		
Date and place				
Signatures and names in print/block letters				