

**Power of attorney to act in the Information Exchange System  
within the scope of utilisation of services  
of Gas Transmission Operator GAZ-SYSTEM S.A.**

Acting on behalf of:

**Company name:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**ZIP City:** \_\_\_\_\_

**Commercial register number:** \_\_\_\_\_

**Competent register court:** \_\_\_\_\_

hereinafter referred to as „Shipper“,

we hereby authorise Mr/Mrs:

**First name and surname:** \_\_\_\_\_

**ID no.:** \_\_\_\_\_

**Proposed login:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Main office location:** \_\_\_\_\_

hereinafter „IES User“,

to take on behalf of the Shipper any and all legal and factual actions in the Information Exchange System necessary to utilise services performed by Gas Transmission Operator GAZ-SYSTEM S.A., in particular to submit applications and declarations within the scope defined by the valid Transmission Network Code.

\_\_\_\_\_  
Date/signature of an authorised  
representative of the Shipper

\_\_\_\_\_  
Date/signature of an authorised  
representative of the Shipper