

Signature and name in a legible form

Web service user agreement for companies

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By this agreement, Mandatum Life Insurance Company Limited/Kaleva Mutual Insurance (hereinafter referred to as	
"Insurance Company") and	
Company/Organization details	
Company/Organization name*	Business ID*
Main user's details	
Main user's name*	Social Security no.*
Email address (work)*	Telephone (work)*
Address (work)	
Other terms and conditions The customer alone is responsible for all actions, assignments, mandates and service requests, which have been made on the basis of the authorisations and use rights issued in the Service. The Insurance Company shall not be held responsible for any harm or damage due to error(s) that the user information provided by the Customer or the Main user may contain. The Customer agrees that the Insurance Company shall not be responsible for any harm or damage due to unauthorized or illegal use of insurance savings by the Main user, other users or third parties, or for other activities that have taken place through the Service. The Customer shall have the responsibility of ensuring that all the users of the Service familiarize themselves with the agreement conditions and agree to comply with them. The Customer shall have the responsibility of ensuring that the Service is not used contrary to the agreement conditions or contrary to the regulations of the banks' identification services. The Insurance Company shall register, using the social security number, the Main user and the user(s) nominated by him/her. The Customer shall be responsible for having the agreement of all the users to provide the Insurance Company with the users' social security number and other necessary information about the users.	
Signatures	
I confirm that I have familiarized myself with the terms and conditions of this agreement and the general conditions of use; I agree with their contents, and I agree to comply with them.	
 □ I assure that, in accordance with the Trade Register, I have the sole right to sign as a representative acting on behalf of the Customer. □ I assure that, in accordance with the Trade Register, I have the right, together with another signatory, to sign using the company's business name. 	
Time and place	
Signature and clarification of the signature of the authorized representative(s), as determined in the Trade Registry.	

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Informing about changes

The authorized use for the Main user shall be in effect until such time when the Customer's written notice of the determination of authorization has reached the Insurance Company. Also, any notifications concerning discontinuation of use of the Service or the nomination of a new Main user must be made in writing. For all of the above-mentioned notifications, a Customer's signature, in accordance with the trade register, is needed.

The authorizations of other users will be terminated once the Main user has made the announcement, either in writing or through the Web Service, about the cessation of their use rights. Removal of the authorizations of the Main user does not remove the rights of other users if no specific request about them has been made to the Insurance Company.

- o The forms can be found at www.mandatumlife.fi.
- o The form/written notice can be mailed to the following address:

Mandatum Henkivakuutusosakeyhtiö/ Kaleva Asiakasposti/ 2011 Kalevantie 3 20520 Turku