

Third Party Letter of Authority

To the Public Sector Scotland Team at Business Stream

I hereby authorise _____ (person or company), based at:

Company registration number (if applicable)

Authorised person or company full address _____ Post code _____

Contact email

Contact number

To receive information and to give instruction on my/our behalf regarding account number(s)
(please list below or provide a separate sheet)

This authorisation relates to matters concerning: (please tick all that apply)

Billing*

Contract**

Both

Start date

End date (maximum 3 years)

Customer authorised signature***

Full name (print)

Authorised job title

Contact email

Contact number

Date

Once completed, please email this letter of authority to transferpsscotland@business-stream.co.uk

*Where billing matters has been selected this authorisation will remain in place until the expiry date. Financial information may continue to be provided to your third party intermediary after the authorisation has been removed from the accounts for commission purposes.

**Where waste/waste water contract only has been selected, financial information may be provided to your third party intermediary for commission purposes.

***Please either print, sign and scan this form, or place an electronic signature in this box.