

Third Party Letter of Authority

To the Public Sector Scotland team at Business Stream I hereby authorise (person or company) Company registration number (if applicable) Authorised person or company full address Post code Contact email Contact number I authorise the above person or company to recieve information and to give instruction on my/our **behalf regarding the following 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

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. Please note, financial information may continue to be provided to your third party intermediary after the authorisation has been removed from the accounts for commission purposes.

Date

Contact number

^{**}Where water or 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 the signature field above.