



Eden Asset Finance Ltd

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FORM OF AUTHORISATION

Client 1	Client 2
Address of property	

I/we hereby give my/our absolute authority to divulge to Eden Asset Finance Ltd or any company stipulated by them, any and all information relating to any and all accounts or businesses held by us for the purposes required by the said company. I/we further confirm that this information be given verbally, by telephone, facsimile, in writing or by any other means requested.

Signatures	
Client 1	Client 2
Date	Date