Partnership Authority Letter

WHEREAS, the partners of [**INSERT REGISTERED NAME OF PARTNERHSIP**][2] (the "**Partnership**") named in this Authority Letter deem it advisable and in the best interest of the Partnership to provide its customers the ability to pay for its goods and/or services through online methods such as bank transfers, credit/debit cards and mobile wallets. This Authority Letter is passed on [**INSERT DATE**][3].

NOW, THEREFORE, THE BOARD RESOLVES,

1. **To use the Safepay Services[4]**

   That the Partnership is authorized to sign up and use the Safepay Services for the purposes of allowing its customers to pay it digitally for its legitimate business activities and will pay the transaction fees agreed separately with Safepay (Private) Limited.

2. **Single partner appointment for signing merchant agreement with Safepay (Private) Limited**

   [**INSERT PARTNER NAME**][5] is authorized and directed on behalf of all partners of the Partnership to electronically sign a merchant agreement (which includes information such as pricing and fund settlement timelines) with Safepay (Private) Limited which will be sent directly to their email address with the following details: [**INSERT SIGNING PARTNER EMAIL ADDRESS**][6] and [**INSERT CONTACT NUMBER OF SIGNING PARTNER**][7].

3. **"Doing business as" statement and website confirmation**

   That the partnership is operating the business under the name [**INSERT NAME OF BUSINESS**][8] and own and operate the website with the following URL (link) [**INSERT LINK**][9] with which the Safepay Services will be integrated.

4. **Provision of KYC documentation[10]**

   All documentation provided to Safepay (Private) Limited is valid and up-to-date at the time of signing this Authority Letter, and that each partner of the Partnership will use best efforts to inform Safepay (Private) Limited if there are any changes to the documents that have been provided.

5. **Financial partners[11]**

   That Safepay (Private) Limited is allowed to work with its financial partners to provide the Safepay Services as described in its Terms of Services and Use (available here: https://safepaydocs.netlify.app/legal).

6. **Bank account for settlement**

   Payments made into the following bank account by Safepay (Private) Limited, or its financial partners, for transactions using the Safepay Services will discharge any obligation to pay the Partnership.

   Bank name: [**INSERT BANK NAME**][12]
   Account title: [**INSERT NAME OF ACCOUNT**][13]
   IBAN: [**INSERT IBAN NUMBER**][14]

7. **Authorized signatory or representative**

[**INSERT NAME**][15] is authorized and directed on behalf of the Partnership to handle communications with Safepay (Private) Limited and provide information on transactions using the Safepay Services. The front and back of the current valid CNIC of the authorized signatory is attached as part of this Resolution.

[SIGNATURE OF PARTNER]	[SIGNATURE OF PARTNER]
[NAME OF PARTNER]	[NAME OF PARTNER]

[ATTACH COLOUR SCAN OF FRONT AND BACK OF CNIC OF AUTHORISED SIGNATORY WRITTEN ABOVE]