

Schleifmühlgasse 2  
1040 Wien

Tel. 05 04 100-0

## AKV-APPLICATION FOR MEMBERSHIP

// Please send your duly completed AKV-APPLICATION FOR MEMBERSHIP either by fax to (+43) (0) 5 04 100 – 1522, by e-mail to [anmeldung@akveuropa.at](mailto:anmeldung@akveuropa.at) or by regular mail.

CONTACT INFORMATION / CORPORATE DATA			
Off. Company Stamp			
Company Name			
Commercial register			
Address			
Phone		Mobile	
Fax		Website	
E-mail			
VAT Reg. No.			
IBAN			
Bank Identifier Code			
CONTACT PERSON			
Title		First Name	Last Name
Date of Birth		E-mail	
Phone		Mobile	

// For the registration a fee of EUR 40,- (without VAT) will be charged.

**AKV ONLINE SERVICES access data**

CONTACT INFORMATION / CORPORATE DATA	
Company Name / Contact Person	
Username <i>min. 7, max. 12 letters, no special characters</i>	
E-mail <i>Password will be sent to this address</i>	

- // You will receive your login details for AKV **ONLINE** within the next few days. Due to security reasons we highly recommend to change the password after signing in the first time.
- // For further questions concerning the **ONLINE**-access the helpdesk of our data center will be pleased to assist you on the telephone under +43 (0) 5 04 100 extention 1230 or 1240.

I hereby order the weekly “AKV Information” (fees will apply)

E-mail <i>Password will be sent to this address</i>	
--	--

- // I, the undersigned, do hereby declare my association pursuant to join as a member of AKV EUROPA – *Alpenländischer Kreditorenverband*, in accordance with the statutes listed in the business conditions. With my signature I do confirm on behalf of the company, to accept the Terms & Conditions of AKV EUROPA in the current applicable version, which can be found at [www.akv.at](http://www.akv.at).

.....  
Place, Date

.....  
Authorized Signature / Official Company Stamp



Officially recognised  
Creditor Protection Association  
According to Austrian insolvency law

# Authorisation of Permanent Representation

(with constant right of withdrawal)

I/ We hereby authorise



Schleifmühlgasse 2, 1040 Wien

**To represent me/ us in all juridical Insolvency Proceedings, namely:**

- To register my/ our claims
- To hold proxy for me/ us at relevant preliminary case hearings necessary for the protection of my/ our rights as trustees, and to act upon my/ our order voting rights
- To fulfil all necessary declarations, to bring in petitions on my/ our behalf, submit motions on applications and to close claims collations
- To receive all monies on my/ our behalf
- To assume payments for me/ us
- To take all necessary steps and make decisions on my/ our behalf for the protection of, and collection of, my/ our claims or for part payments of the same, in insolvency cases
- To enforce my/ our rights relating to our claims-demand(s) in case of loss of schedule, in the case of resurgent award of claims, and to submit potential applications for advance suspension and levy of liquidation processes
- To apply for the opening of insolvencies and to actively follow-up upon claims motions

I/ We hereby revoke any previously issued authorisations to other persons

.....  
Town, Date

.....  
Corporate Stamp / Signature

Our terms & conditions are published on our website: [www.akv.at](http://www.akv.at)