

[Company Letterhead]

[Date]

[Bank Name]

[Bank Address]

[City, State, Zip Code]

Subject: Letter of Authorization for Interbank Tiered Pricing

Dear [Relationship Manager Name or Department],

I, [Your Name], acting as the authorized representative of [Company Name], hereby authorize [Bank Name] to enroll the following accounts in the Interbank Tiered Pricing program:

Account Details:

Account Name: [Account Name]

Account Number: [Account Number]

Currency: [Currency Type]

By signing this letter, [Company Name] acknowledges and agrees to the following:

- The pricing applied to the aforementioned accounts will be determined based on the total aggregate volume or balance tiers as defined in the bank's current fee schedule.
- The bank is authorized to share necessary transactional data between internal departments to calculate and apply the correct pricing tier.
- This authorization remains in effect until written notice of revocation is provided by an authorized signatory of the company.

Please implement these pricing structures effective as of [Effective Date]. Should you require any further documentation or information, please contact [Point of Contact Name] at [Phone Number] or [Email Address].

Sincerely,

[Signature]

[Full Name]

[Job Title]

[Company Name]