



BRED (Vanuatu) Limited
PMB 9088
Port Vila
Vanuatu

Client Address

Dear whom it May concern

I/We ask you to hold or to continue to hold on my/our behalf, packets and/or boxes and I/we acknowledge and agree that the Bank will hold them under the following conditions:

1. The bank will accept the packets/ boxes only if they are closed and are kept closed against inspection.
2. The Bank will not insure the contents of the packets/boxes and I/we acknowledge that the contents are unknown to the Bank.
3. The Bank and its employees are not in any circumstances under any liability to me/us or to any third party for any loss or damage of any kind that may arise or result directly or indirectly from any act, neglect, default or negligence by the Bank or any of its employees.
4. To the fullest extent permitted by law, I/we hereby indemnify the Bank and hold it, its employees harmless against all claims for loss or damage arising directly or indirectly out of or in connection with the Bank holding the packets and/or boxes on my/our behalf.
5. I/We acknowledge that you are or may be required by law to give access to the contents of my/our safety deposit box to certain government departments.
6. You are to deliver the packets/boxes only to me/us in terms of the authority contained in my/our account operating authority from time to time or to any agent whom I/we authorize in writing to take delivery and my/our receipt or the receipt of the authorized person(s) or agent will be sufficient discharge to the Bank.

These terms and conditions shall also apply to packets and or boxes that I/we may later lodge with the Bank from time to time.

You may debit my/our BRED Bank account number _____ with any custody charges when required.

I would like to rent a **Standard Size Box** (Small) / **Non-standard Size Box** (Large) *(Please circle preference)*

I have read the Terms and Conditions for the Safety Deposit Box supplied to me by the Bank.

Client Name

Client Name

Client Signature

Client Signature

BANK USE ONLY

Date Received: _____

Allocated Box Number: _____

Custodian Name: _____

Custodian Signature: _____