

One-Time Certificate for Icelandic Banks complying with Article 3.2 of Act No 94/1996

Please mail the completed and signed certificate to:

Clearstream Services Prague Branch
Tax Services Prague
Futurama Business Park
Building B
Sokolovska 662/136b
18600 Prague 8
Czech Republic

Clearstream Banking¹ account number(s): _____ (the "Account")

We, the undersigned, being a customer of Clearstream Banking S.A. ("Clearstream Banking"), may hold from time to time in our Account Icelandic debt securities (the "Securities").

For the purposes of ensuring that we are eligible for exemption from Icelandic withholding tax on interest and redemption payments received from the Securities in the Account, we hereby certify that:

- we are an Icelandic Bank complying with Article 3.2 of Act No 94/1996;
- we endorse due diligence, withholding and reporting responsibilities to the extent applicable and required by our status.

Our full name: _____

Our Icelandic ID (Kennitala): _____

We irrevocably authorise Clearstream Banking to act on the information contained in this certificate. We hereby appoint Clearstream Banking as our attorneys-in-fact with authority to collect and forward this certificate or a copy thereof, any attachments and any information relating to it to the Icelandic Tax Authorities if these prove relevant to any administrative or legal proceedings or official inquiries undertaken or forthcoming.

We accept that Clearstream Banking shall not be required to verify the authenticity, completeness, accuracy or correctness of any such information and documents.

We hereby undertake to notify Clearstream Banking promptly upon receipt of any information that would render any statement in this certificate invalid, untrue, incorrect, inaccurate, outdated or incomplete. We commit ourselves to notify Clearstream Banking immediately, but in any case prior to the applicable payment date, if there is a change in the eligibility of the holdings in the securities in our account with regard to ownership of such securities or to our settled position in those securities that are eligible for the exemption.

We accept full responsibility in the case of any claims liabilities, damages, costs and expenses of any kind that may be incurred, notably in terms of additional taxes, interest thereon or penalties levied by tax authorities in connection with any payments made in reliance upon this certificate, including any additional information provided in connection thereto.

We hereby agree to reimburse Clearstream Banking, forthwith upon first demand, with all payments made by Clearstream Banking to the Icelandic Tax Authorities or any relevant authority in connection with any withholding tax hereunder.

We irrevocably authorise Clearstream Banking to debit the account number _____ opened on the books of Clearstream Banking with any amount (including, if applicable, any additional taxes, interest or penalties imposed) that the Icelandic Tax Authorities request to be repaid.

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¹ Clearstream Banking refers Clearstream Banking AG (for Clearstream Banking AG customers using Creation Accounts), registered office at 61, Mergenthalerallee, 65760 Eschborn, Germany and registered in Register B of the Amtsgericht Frankfurt am Main, Germany under number HRB 7500.

One-Time Certificate for Icelandic Banks complying with Article 3.2 of Act No 94/1996 (cont.)

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We acknowledge that this certificate is valid until revoked.

This One-time Certificate is governed and construed in accordance with the laws of the Grand Duchy of Luxembourg (for Clearstream Banking S.A. customers) and Germany (for Clearstream Banking AG customers using Creation accounts) and the courts of Luxembourg (for Clearstream Banking S.A. customers) and the courts of Germany (for Clearstream Banking AG customers using Creation accounts) shall have exclusive jurisdiction for all legal proceedings relating thereto.

We hereby certify, under penalty of perjury, that the above information is true, correct, up-to-date and complete and that we are authorised representative(s) of the Clearstream Banking customer named below.

For and on behalf of:

Name of Clearstream Banking customer: _____

Full address: _____

By (authorised signature/s):

Authorised Signature

Authorised Signature

Name

Name

Title

Title

Place

Date

¹ Authorised signatures must be a part of the valid signature list provided, to Clearstream Banking, by customers