[INSERT Company letterhead]

**Letter of Authorization (“LOA”)**

**Date**: Wednesday, 7 August 2024

This is to certify that “VERTEX LV” LTD. is authorized to use sender IDs (SIDs) specified below within the indicated time frame to send A2P SMS on behalf of [insert full Company name and information of the LOA signatory] (hereinafter: the “**Company**”). In the event the Company acts as an aggregator (*i.e., as a company receiving messages from its direct clients and sending them for onward routing to such client’s ultimate recipients*), the Company shall additionally deliver LOAs signed with its direct clients as proof of its authorization to use such sender IDs (SIDs).

The Company represents and warrants that the SIDs specified below represent the name/brand/identity of the Company and that no other person or entity has the right to use or cause the distribution of these SIDs.

Notes:

* Purposes of SMS: OTP / NOTIFICATIONS / MARKETING / INTERNAL COMPANY USE / ALL,
* SID must have a minimum of three (3) characters, maximum of eleven (11) only,
* Spaces are allowed. One space is equivalent to one (1) character,
* Upper and lower cases are allowed,
* Underscore, period, dash, question mark and exclamation points can be used, but this is highly discouraged as it may not reflect depending on the device of the user. We recommend limiting SIDs to ASCII letters, 0 – 9 digits and spaces,
* SIDs must not be derogatory,
* SIDs should truly represent the company name / brand / identity,
* “VERTEX LV” LTD. reserves the right to remove SIDs that are found to be in violation of these guidelines.

**List of sender IDs (SIDs)** (*add rows as needed*)**:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sender ID** | **Purpose of SMS** | **Validity period (2 year only)** | |
| **Start Date** | **End Date** |
|  |  | Wednesday, 7 August 2024 | |
|  |  |  | |
|  |  |  | |

By signing this LOA, the Company confirms that they have read and fully accepted all the terms and conditions stated within this LOA. To indicate their acceptance, the authorized representative of the Company will sign this LOA.:

Submitted by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Full name of the Company’s authorized signatory]

[Title]

[Company name]

Noted by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

“VERTEX LV”

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