



**Appendix I to the Document
of Accession to the
Framework Agreement for
identification and
authentication of users for
access to the information
systems of Enagás**

APPENDIX I TO THE DOCUMENT OF ACCESSION TO THE FRAMEWORK AGREEMENT
FOR IDENTIFICATION AND AUTHENTICATION OF USERS FOR ACCESS TO THE
INFORMATION SYSTEMS OF ENAGÁS

**LIST OF PERSONS AUTHORISED BY FOR ACCESS TO THE
INFORMATION SYSTEMS OF ENAGAS WITH TWO-FACTOR
AUTHENTICATION SYSTEM:**

<FULL SUBJECT> (hereinafter SUBJECT), with registered office at <ADDRESS> and holder of Corporate Tax Code <CTC>, filed with the Mercantile Registry of <MERCANTILE REGISTRY>, represented in this act by¹ <REPRESENTATIVE NAME SURNAME1 SURNAME2>, in their capacity as attorney-in-fact and by virtue of the power of attorney executed before the notary public of <CITY> <NOTARY NAME SURNAME1 SURNAME2>, under their record number <no.> on <DD> <month> <yyyy>, authorises the following persons of its organisation to access the information systems of Enagás using the Two-Factor authentication system provided by this party, in representation of SUBJECT, and confirms the registration and/or modifications in this system on behalf of ENAGAS, S.A. to enable this access to be effective:

Two-Factor Users:

Name	Surname	ID/passport	Corporate email	Mobile phone number	Registration Date	De-Registration Date
					dd-mm-yy	

ENAGÁS, S.A. will be able to de-registrate the above users in the following cases:

- Users that haven't validated their access in the ten working days after the sending of the e-mail "Bienvenida 2FA (welcoming 2FA)", where the password is indicated.*
- Users that have not acceded to the SL-ATR System in the last twelve months.*

¹This Appendix I, and its successive updates, must be signed by the same representative of <SUBJECT> that signed this Document of accession to the Agreement; in the event that, for justified reasons, Appendix I is signed by a different person, the power of attorney of the new representative must be presented for authentication.

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Component Certificate:

Representative	Common Name of the certificate

This Appendix cancels and supersedes the immediately preceding one signed on <day> <month> <year>.

Madrid, DD MONTH 20AA

**For <FULL SUBJECT>
Legal representative**