

Personal Confidentiality Agreement

The undersigned has read and agrees to follow those Forsmarks Kraftgrupp AB applied management policies for user information according to FKA instruction F-0000323.

The rules of management applicable to the commission/work involving communication of information owned by FKA or FKAs subcontractors/partners.

If I become aware of or suspect that information becomes available to unauthorized persons, I will, without delay inform FKA.

This confidentiality agreement shall also apply after termination of employment/commission completion.

I am also aware that breach of FKAs rules for privacy and information management can result in criminal liability.

Location

Date

Signature

Clarification of signature

Employed

If the said person shall have access to Arken, a copy of the confidentiality agreement should also be signed by the responsible FKA-Manager and forwarded to NEG.

Signed by the FKA-Manager

Clarification of signature

Organizational department