

[Applicant's headed notepaper]

Annex 2A4: Withdrawal of Release of Delivery Slot or Monthly Slot or Complementary Slot form

OLT Offshore LNG Toscana
 Via Gaetano D'Alesio 2
 57126 Livorno – Italy
 attn. Commercial Manager
 Marika Venturi
 oltcommercial@legalmail.it
 commercial.operations@oltoffshore.it
 Fax: 0039 0586210922

Sent by certified email or fax

Re: Withdrawal of Release of Delivery Slot or Monthly Slot or Complementary Slot

Whereas the Company [•], tax registration no. [•], VAT no. [•], registered in the companies' register of [•] and having registered office in [•] ("**User**"):

- a) entered into a Capacity Agreement with the Operating Company on [•], and holds the regasification capacity indicated below following the allocation process envisaged by Clauses 2.1.8, 2.1.5.1 of the Regasification Code,
- b) on [•] sent a Statement of Release of Delivery Slot or Monthly Slot or Complementary Slot in accordance with the provisions of Clauses 3.2.3.2 of the Regasification Code.

I, born on...../...../....., tax registration no....., resident in, in my capacity as legal representative or duly empowered person, in the name and on behalf of the Company [•], hereby request, in accordance with the provisions of Clause 3.2.3.2f) of the Regasification Code, the withdrawal of the release of the Delivery Slots or Monthly Slots or Complementary Slot indicated below:

Gas Year [yyyy/yyyy]	Relevant Month and Year [mm/yyyy]	Sequential Number of the slot [number]	Scheduled Arrival Window for the Delivery Slot (if applicable) [DD/MM/YYYY]	Regasification capacity allocated and subscribed [m ³ _{liq} /year]

[Applicant's headed notepaper]

The User is aware that, following the sending of this withdrawal of release, it will again be subject to any obligations and liability arising from or associated with each Delivery Slot or Monthly Slot or Complementary Slot indicated above.

Yours sincerely,

[Place], [DD/MM/YYYY]

[SIGNATURE]

Attachment: photocopy of the signatory's identity document