POWER OF ATTORNEY NO.____ on behalf of legal entity

			20
(city)			
(full name of	the principal organization, ind	licating the type of business entity	,),
as represented by	(ich title and full name	of person issuing power of attorne	,
		thority of the person issuing power	
	(full name o		,
	(full name o	of authorized person)	
passport number	, contact te	lephone number	, to
collect transport passe	s and drivers' accred	litation badges in accord	dance with the
attached lists from		accredita	ation point.
		er of attorney is not valid drivers to be accredited).	
Power of attorney grante	d until	20	
Certified by	authorized person)	(signature of authorized perso	 on)
Principal			
(job title)	 Organization se AFFIX SEAL HEF 	(signature)	(full name)

List of vehicles (the power of attorney is not valid without the list of vehicles to be accredited)

Vehicle make	Model	License plate number

Principal

Organization seal

(job title)

(signature)

(full name)

AFFIX SEAL HERE

List of drivers

(the power of attorney is not valid without the list and original personal data consent forms of all drivers to be accredited)

Full name	Date of birth	Driver passport number

Principal

(job title)

Organization seal

(signature) (full name)

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