

..... date
(place)

AUTHORISATION
to the act as a direct representative

We give authorisation to Customs Agency WEST LUX sp. z o.o., placed in Warsaw 03-877
Warsaw, Utrata Street 4, REGON 147405042 , NIP 5242771956
Vitali Buda o11763
to perform on behalf of

.....
.....
.....
.....
(name and headquarter company which gives authorisation)

following activities connecting with turnover of goods:
any acts prescribed by provisions of customs law.

This authorisation is valid to: *

- permanently
- with a fixed time to
- only for one act.

.....
signature of authorised person

NR : NIP:

NR : EORI:.....

EMAIL:.....

TEL:.....

FAX:.....