Power of Attorney

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To Whom It May Concern:

I hereby have entrusted the following person to be a proxy regarding application for EU-type examination . I am therefore responsible for the contents of the application.

Agent Information				
Company Name:				
Company Address:				
Contact Name:				
Job Title:				
Phone:				
Email:				

Product Information		
Brand Name:		
Model (s):		

Any and all acts carried out by on our behalf shall have the same effect as acts of our own.

Regards, Applicant's signature:

Applicant Information			
Company Name:			
Company Address:			
Contact Name:			
Job Title:			
Phone:			
Email:			