



Name, Surname: _____

Address: _____

Personal code:
(Ad hoc) _____

Tel.: _____

E-mail: _____

Authority Direct representation

Hereby, _____
authorizes JSC „LATVIJAS PASTS” VAT No. 40003052790, Ziemeļu street 10,
Marupe district, LV-1000 for direct representation to declare the goods at
customs control points of the Republic of Latvia, receive and submit the goods
to inspection, carry out customs formalities, apply customs guarantee, provide
customs operations according to legislation of the Republic of Latvia and EC.

**Power of Attorney - Indefinite, it will remain in effect until
either or both parties express their wish to terminate this
power of attorney in writing.**

Name, Surname _____

Authorized signature

Date _____