

FORM FOR GRANTING POWER OF ATTORNEY

Power of attorney is given to following person/company:

Company name/Service provider:		Advokatfirmaet Aider Legal AS		Organization number:		835 700 402	
Address:	Lars Hilles gate 30	Postal code:	5008	City:	Bergen	Country:	Norway
Phone number:	+47 55 29 90 00			Email:	contact.legal@aider.no		

Name and information of grantor:

First name:		Surname:	
Norwegian personal number/D-number:			
Address:		Postal code:	
City:		Country:	
Phone number:		Email:	
Place and date:			
Signature:			

The power of attorney includes following:

1. Handle all obligations connected to Norwegian taxation. Collect necessary information and sign the tax return, and other documents connected to Norwegian taxation.
2. Representation in complaints and right to investigate all documents related to the Norwegian tax situation.
3. Send copy of tax card, tax return and tax assessment for the person/company the grantor authorizes.

The power of attorney is valid from date of signature and until it's withdrawn by the grantor, or if the service provider terminates the contract.

Enclose a copy of an ID document belonging to the person granting the power of attorney (passport or other acceptable ID document) with a visible signature, in the box below.