Authorization

1,	(name of proxy giver)
authorize	(name of proxy taker)
that as from	to
	ters concerning my rent conditions to SGS that I am fully responsible for any decisions taken a.
Name and social security nun	nber of proxy giver
Place and date	
Signature	
Proxy taker's personal data	ı:
Name and social security nun	nber (to be printed)
Address and telephone numb	per
Signature	
Proxy giver's signature to b	ne certified by two persons:
Name (to be printed)	Name (to be printed)
Signature	Signature
Telephone number	Telephone number