

Name:

.....

DATE:

Social security number./Org.number.:

Mail/Fax:

I want to use the alternative method to calculate the tax: Yes__ No__

POWER OF ATTORNEY

I hereby give OJT AS the power of attorney to do the custom clearance and registration on my

..... with vin.number.:

If you have any questions please contact me on tel.:

OJT AS can keep the car until everything is paid!

Best regards

.....

COPY OF DRIVING LICENSE/COMPANY CERTIFICATE MUST BE SENT WITH THIS ATTORNEY!!!

Wish registr. plate letters belonging to: _____

Insurance company: _____

Remember to contact your insurance company regarding insurance for the car. This must be in place when we register your car.

Please send back to:

Fax: +47 32 24 25 95

Email: spedisjon@ojt.no