

AUTHORIZATION

To.:

Vergunningenloket

Department of Bentana di Informashon

Saliña 127 (Eurobuilding)

=====

Last and first name: _____

Born: _____

Identification number _____

Authorizes:

Last and First name _____

Born: _____

Identity number _____

For: Submission Status Retrieval

My Statement on the Behavior (VOG)

Signature _____ Date _____

Appendix:

1. Copy of identification of the applicant;
2. Copy identification of the authorized representative.