



## Power of Attorney

**To:**

Umferðarstofa  
The Icelandic Road Traffic Directorate  
Borgartúni 30  
105 Reykjavík  
Iceland

**Date:** \_\_\_\_\_

We hereby confirm and certify that the company,

\_\_\_\_\_  
Name of importer

is the sole authorised representative of,

\_\_\_\_\_  
Name of manufacturer

Conditions and restrictions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signatures:

\_\_\_\_\_  
Representative/director of manufacturer

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness