AUTHORITY FORM FOR LEGALIZATION OF DOCUMENTS

(Italia)

[ILP Form L001]

I Mr/Miss/Mrs.Ms ---------------------------------------------------------------

D.O.B------------------Passport No ………………………Valid till ---------------Nationality: -----------National Identity Card Number: -------------------

Residential Address:-------------------------------------------------------------

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Permanent Address: -------------------------------------------------------------

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Do hereby appoint and authorise International Legal Partners (Private) Limited having its office at Abudhabi Towers, Block B, 6th Floor, F-11 Markez, Islamabad Pakistan to submit my following documents for legalization/attestation to the Italian Embassy/Consulate offices in Pakistan.

|  |  |  |
| --- | --- | --- |
| Description of Document  | Reference of Documents  | Date of Document issued  |
|  |  |  |
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I further authorise that International Legal Partners (Private) Limited may appoint their staff member to submit such documents for legalization /attestation or verification to the relevant offices or authorities including foreign office, union council, NADRA, Passport office, Police Offices, or any other relevant office that hols authority to attest/legalize or verify any of my document listed in this Form.

I, the undersigned, confirm and declare that I am fully aware of the penalties, in case of false declarations, as per art. 76 of Presidential Decree no. 445 of 28/12/2000

Signature/or Thumb Impression: ------------------------------------------------------------

Date :---------------------Direct Contact Number or Email ID: ---------------------------