

### Authorization letter

I

Surname, First Name	
DOB	
Place of Birth	

authorize Mrs / Ms / Mr

Surname, First Name	
DOB	
Passport No.	

to submit my visa-application to the service provider VFS Global , 79 Anson Road #15-02, Singapore 079906, make additions and necessary adjustments to my application form, as well as hand over, sign and hand in further statements to the application.

The above representative is entitled to collect my passport at the Visa Department of the Embassy of the Federal Republic in Singapore or the service provider\*.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\* The passport will have to be collected where the visa was applied at.