

FULDMAGT/POWER OF ATTORNEY

Fuldmagtsblanketten skal printes, udfyldes og underskrives. Fuldmagtsblanketten kan sendes til Flygtningenævnet via den digitale postkasse (Digital post), sikker-mail eller med posten/*The power of attorney form has to be printed, completed and signed. The power of attorney form can be sent to the Refugee Appeals Board via the digital mailbox (digital post), secure e-mail or by letter.*

Husk at orientere Flygtningenævnet, hvis du ikke længere ønsker, at fuldmagten skal gælde/*Remember to notify the Refugee Appeals Board if you no longer want the power of attorney to apply.*

Fuldmagts giver/The principal

Fulde navn/Full name: _____

Fødselsdato/Date of birth: _____

Adresse/Address: _____

Telefonnummer/Telephone number: _____

PersonID eller CPR-nr./PersonalID or CPR no.: _____

Jeg giver hermed fuldmagt til/I hereby authorize

Fuldmagtshaver/The holder of power of attorney

Fulde navn/Full name: _____

Adresse/Address: _____

Telefonnummer/Telephone no.: _____

CPR-nr. eller CVR-nr./CPR.no or CVR.no: _____

som kan repræsentere mig som partsrepræsentant under behandlingen af min sag hos Flygtningenævnet/*to represent me during the processing of my case at the Refugee Appeals Board.*

Dette indebærer, at fuldmagtshaveren blandt andet får ret til/*This means that the holder of power of attorney among other things has the right to,*

- at indgive en ansøgning eller klage på mine vegne/*submit an application or complaint on my behalf*
- at få aktindsigt i min sag/*recieve right of access to the documents in my case*
- at afgive udtalelser til brug for min sag/*submit statements for use in the processing of the case*

Jeg er indforstået med, at alle breve fra Flygtningenævnet sendes til fuldmagtshaveren, så længe fuldmagten gælder. Jeg kan dog når som helst tilbagekalde fuldmagten ved at give besked herom til Flygtningenævnet. *I hereby agree, that all letters from the Refugee Appeals Board will be sent to the holder of the power of attorney as long as the authorization is effective. I am, however, at any time able to withdraw the power of attorney by informing the Refugee Appeals Board.*

Dato/Date: _____

Underskrift/Signature _____