

## **Authorization Letter**

This is to certify that I ..... (Applicant's Name)  
authorize my agent/ representative, whose signature are verified below, to collect the sealed envelope on  
my behalf.

**If Agent, please fill the following details:**

Name of the Agency: .....  
Name of the staff member who will collect the sealed envelope: .....  
Contact details of the Agency: .....  
.....  
Specimen of the authorized agent's signature: .....

**If Representative, please fill the following details:**

Name of the Representatives: .....  
ID Number of the Representatives: .....  
Relationship with the Applicant: .....  
Specimen of the authorized recipient's signature: .....

**Please note that representative / agent are required to present the original Identity Card for  
verification purpose. The envelope containing passport / document will NOT be handed over  
without proofing the Identity.**

Date:           ,       /       /20.... .

**VFS Reference or Passport Number:**

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**Applicant's Signature**