

Lublin, date .....

**POWER OF ATTORNEY**

I, the undersigned .....

.....

.....

.....

(name, surname, address, PESEL number, the series and number of the authorizing person's identity card)

authorize Mr./Ms. ....

.....

.....

.....

(name, surname, address, PESEL number, the series and number of the identity card and the degree of kinship with regard to the attorney)

to settle matters in Wydział Spraw Administracyjnych Urzędu Miasta Lublin [Department of Administrative Affairs of the Lublin City Office]:

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(provide exact data that unambiguously identifies the subject matter)

.....

(a legible signature with the full name and surname of the authorizing person)

The stamp duty for the power of attorney is PLN 17 (does not apply to powers of attorney granted to the spouse, ascendant, descendant or siblings).