R
ROTHMANN
ABSCHLEPPDIENST

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Purchase and collection authorisation

1. Authorising person / company

Name / company

City / town

Country

2. Authorised person

Full name

3. Vehicle and scope

Make / model

Vehicle number / internal reference

Collection location (optional)

Registration number (optional)

Scope of authorisation - please tick exactly one option:

☐ Collection only ☐ Purchase only ☐ Purchase and collection

I / we authorise the person named above to purchase and/or collect the specified vehicle on my / our behalf, solely within the scope selected above.

4. Place, date and signature

Place

Date

Signature of authorising person

Company stamp (if required)