

**AUTHORISATION FORM**

I, the undersigned **Authorising Person:** .....  
 Name, surname and date of birth (individuals/entrepreneurs) /  
 Business name (legal entities), company registration number (legal entities/entrepreneurs)

Permanent residential address (individuals/entrepreneurs) / Registered office (legal entities):

.....  
 Municipality, postcode, street, house number ("č.p./č.o.")

**Hereby grant** under section 27 of the Act No. 280/2009 Coll., as amended ("the Rules of Tax Procedure"), section 441 *et seq.* and section 2455 *et seq.* of the Act No. 89/2012 Coll., the Civil Code, as amended ("the Civil Code") this **Authorisation** to

**The Authorised Person: Česká pošta, s.p.**, with its registered office located at Politických vězňů 909/4, 225 99 Prague 1, company registration number: 47114983, VAT No.: 47114983, registered in the Commercial Register maintained by the Municipal Court in Prague, file No. A 7565,

**For indirect representation in customs clearance**, i.e. to represent me in its own name and on my behalf before the **CUSTOMS OFFICE PRAGUE RUZYNĚ**, Detached Department 23 Customs-Postal Operations.

In particular, the Authorised Person is hereby authorised to sign customs declaration forms, receive decisions made in customs procedure and customs assessments, waive appeals, file appeals, provide oral statements and information forms, receive payments and issue receipts of such payments, and to do any other acts required by customs authorities including all other acts related to customs clearance.

The Authorised Person acknowledges and agrees that all acts within the scope of this Authorisation will be carried out by an employee of the Authorised Person as part of their job on basis of a delegated authorisation.

The Authorising Person hereby agrees to provide all necessary cooperation if so requested by the customs authority or the Authorised Person. The Authorising Person also agrees, at the latest upon delivery of the consignment or on basis of the Authorised Person's request, to pay to the Authorised Person the fee for representation in customs clearance set in the Authorised Person's Pricelist, customs duty and all other charges related to the consignment, even if the consignment has not been delivered, especially for reasons on the Authorising Person's side. The Authorising Person declares that he/she has read the Authorised Person's valid Pricelist. The Authorised Person's valid Pricelist is available at the Authorised Person's website on <https://www.ceskaposta.cz/ke-stazeni/cenik-sluzeb-ceske-posty>.

This Authorisation takes force on the day of signature by the Authorising Person and is granted for an indefinite period of time or until revoked.

In ..... on .....  
 Authorising Person's signature

.....  
 Name, surname (and title, if any) of the Authorising Person / Authorising Person's representative

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**The following section is to be filled in only if the permanent residential address / registered office differs from the delivery address:**

Delivery address I: .....  
 Municipality, postcode, street, house number ("č.p./č.o.")

Delivery address II: .....  
 Municipality, postcode, street, house number ("č.p./č.o.")

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**DO NOT FILL IN! The following section will be filled in by the Authorised Person, i.e. Česká pošta, s.p.:**

Date of delivery of the Authorisation Form: .....  
 Authorised Person's signature

Assigned reference number: ..... Date of expiry of the Authorisation: .....