

CERTIFICATE of ORIGIN AUTHORISED SIGNATORIES

Exporter's full legal name

ABN: ACN:

Postal Address

Street/site Address

General Tel: General Fax: Website:

General contact (Must be an authorized officer, partner or general manager)

.....
(Name)

.....
(Title)

Contact Tel: Contact Fax: Contact E-mail:

I hereby authorize the following persons to sign the declaration and to verify all information relating to the content or otherwise of products being exported for which a Certificate of Origin is issued by THE AUSTRALIAN CHAMBER OF COMMERCE AND INDUSTRY, at the request of the exporter named above. I further agree to notify THE AUSTRALIAN CHAMBER OF COMMERCE AND INDUSTRY of any changes to the details listed and declare that THE AUSTRALIAN CHAMBER OF COMMERCE AND INDUSTRY is not required to undertake any independent verification of any document which purports to be signed by the above mentioned exporter if such documentation is signed by any of the persons so listed, on behalf of the exporter.

(1)
Full Name Signature
Position:

(2)
Full Name Signature
Position:

(3)
Full Name Signature
Position:

(4)
Full Name Signature
Position: