



POWER OF ATTORNEY
FOR BUSINESS REPRESENTATION

This Power of Attorney is a legal document in which one company or one person (applicant) gives to IQC International Quality Control (attorney) the authority to make specific tasks and interventions on their behalf. All information picked during the effectiveness of this document will be treated confidentially from IQC, its staff, its mandated agents or exceptionally to the concerned governments and forces in law. This document can be controlled at any time by contacting the applicant or by contacting IQC's main Office.

1)- Applicant Company or person:

Complete name: _____

Complete address: _____

Phone number: _____

Email: _____

Person in charge, complete name and position: _____

Representative, contact name: _____

Representative, Phone number and email: _____





2)- Mandate and field of power of IQC (Attorney):

(The applicant limits IQC to the interventions concerning the specific following assets)

A)- Purchasing/pricing negotiations: _____ B)- Control of ordered quantities: _____

C)- Agreement/contract's negotiations: _____ D)- Control of ordered quality: _____

E)- Factory visit and audit: _____ F)- Visit of mid-production: _____

Limitations of the mandate and power:

(Include annexes document if needed)

3)- Concerned factories and orders:

A)- All factories doing business with the applicant: _____

B)- All orders placed by the applicant: _____

C)- Only this/those specific Factory (ies): _____

D)- Only this/those specific order (s): _____



4)- Date of Effectiveness:

From: Day: ____ Month: ____ Year: ____

To: Day: ____ Month: ____ Year: ____

For single intervention only: ____

For multiple interventions: ____

5)- Signatures:

Before you (applicant) sign, be sure that:

1. You understand the authority your attorney may have.
2. You trust your attorney to act responsibly and follow any instructions you may provide.
3. You are giving this power of attorney of your own free will.
4. You have carefully considered obtaining advice from a lawyer or accounting
5. You take responsibility of all mistakes, mismanagements or any business consequences from your attorney during and after mandate and effectiveness of this documents.

You must sign in front of one witness

If you are sure that the form says what you want it to say, sign your name in the space provided.

After you have signed the form, print or stamp your company crest.

Fax or Email a copy of this document to IQC as soon as it is complete.

Mail the original document to IQC's main office in Montreal Canada.

Revoking this Power of Attorney:

You have the right to revoke (cancel) this power of attorney at any time.

If you decide to revoke this document, you must write the revocation down on paper, sign and date it, and have it witnessed in the same way as this document. Notify your attorney, accounting and all the people you told about your power of attorney. Send your revocation to IQC's main office and ask for an accused of reception.

Signature of person in charge (page 1): _____ Date: _____

Witness signature: _____ Date: _____

Witness complete name, address, phone number and relationship with the applicant:





International Quality Control

TEL: +1 514 996-7682 FAX: +1 514 768-0774

Special instructions

(Check list, Detailed attorney's tasks, Factory address, contact names...)

