Исх.№\_\_\_\_\_\_ от \_\_\_\_\_\_\_\_\_

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| **Доверенность**  Настоящей доверенностью производитель сварочного оборудования \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  адрес (место регистрации): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  адрес местонахождения производства:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  ИНН/идентификационный признак: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  контактное лицо: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  Тел.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Факс: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Cайт: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  уполномочивает компанию \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  адрес (место регистрации):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  ИНН:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  контактное лицо: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  Тел.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Факс \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Cайт: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Представлять интересы и действовать от имени выше  указанного производителя при процедурах аттестации, в  том числе:   * Подавать в аттестационный центр все необходимые документы для проведения аттестации. * Представлять на аттестацию сварочное оборудование. * Сопровождать работы по аттестации. * Решать от имени производителя технические, организационные и другие вопросы, связанные с проведением работ по аттестации. * Разрабатывать и согласовывать нормативную и техническую документацию на сварочное оборудование. * Получать Свидетельства об аттестации, протоколы аттестации и другие аттестационные документы. * Осуществлять гарантийное обслуживание. * Обеспечивать соблюдение требований законодательных и нормативно-правовых актов РФ.   Настоящая доверенность действительна до \_\_\_\_\_\_\_\_\_ без  права передоверия третьим лицам.  Руководитель  организации  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ И.О. Фамилия  МП подпись | **Power of Attorney**  By this power of attorney, the manufacturer of the  welding equipment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  registration address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  production address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  INN/identification tag:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  contact person : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_;  E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_; web site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  authorizes the company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  registration address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  INN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  contact person : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  Tel. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Fax : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; web site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;  represent and act on behalf of the above manufacturer in  certification procedures, including:   * Submit to the certification center all necessary documents for certification. * Submit welding equipment for certification. * Accompany certification work. * Solve on behalf of the manufacturer technical, organizational and other issues related to the certification work. * Develop and coordinate regulatory and technical documentation for welding equipment. * Receive certification Certificates, certification protocols and other certification documents. * Provide warranty. * Еnsure compliance with the requirements of legislative and regulatory acts of the Russian Federation   This power of attorney is valid until \_\_\_\_\_\_\_ without the  right of transfer to third parties.  Head of  Organization First Name Last  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name  РР signature |