107011 

Received by

Received by

the Swedish Migration Agency

**Power of attorney**

the Swedish mission abroad

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| Use this power of attorney if you are going to move to someone, work, study or visit Sweden, apply for passport, residence card, certificate of permanent right of residence or residence status or if you have applied for Swedish citizenship and you want someone to represent you. You can revoke your power of attorney at any time by submitting the form Revocation of power of attorney, 111011, to the Swedish Migration Agency. Do not use this power of attorney if you are seeking asylum. |

**1. Personal details of the representative**

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| Surname (Family name), First name(s) JACOB, REUBEN MATHEW  |
| Date of birth/Personal ID No. (YYYYMMDD-NNNN) 19860112 |
| Address C-130, POCKET-06, SECTOR 82, NOIDA, NOIDA, GAUTHAM BUDDHA NAGAR, UTTAR PRADESH - 201301 |

**I hereby confirm that the person above or the person they appoint in their place – is my representative.**

**My representative has power of attorney to represent me in a matter concerning a**

− residence permit − work permit − visa

− alien's passport − travel document − residence card

− permanent right of residence − residence status

− Swedish citizenship

− public counsel

− refusal of entry

− expulsion

My representative also has power of attorney to represent me in a case where I represent a child under 18 years.

My representative can submit an application, appeal a decision or judgment and request a reconsideration on my behalf. My representative may access any documents and receive

notifications or service. In addition, my representative may perform all the measures required and appear for me. Note that it is not possible to have a representative apply for Swedish citizenship.

This power of attorney is valid until I revoke it. If I do not revoke it, this power of attorney ceases to apply when the matters the power of attorney relates to have been finally decided.

**2. My personal details**

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| Surname LOPEZ | First name(s) AJAY JUDE |
| Date of birth/Personal ID No. (YYYYMMDD-NNNN) 19980625 | Case number or control number\* 61975354 |
| Address 12E, NORTH TOWER, ORIENTAL GARDEN, NR. KARUKAPILLY POTTAKUZKHI MAMANGALAM ROAD, ERNAKULAM, PIN: 682026, KERALA, INDIA |

\* Only needs to be filled in if you have a case number or control number.

**3. My signature**

107011 2023-07-31

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| Place and date Signature |