

*For all Foreign Power of Attorneys, this attachment must be completed on your (Client **FOREIGN ENTITY**) **Company letterhead**, and accompanied by the signed original SEKO CUSTOMS IMPORT POA form.*

Corporation Power of Attorney, Foreign Entity Attachment.

Know all men by these presents that _____ (**FOREIGN ENTITY**) _____,
(Company Name)

a company incorporated under the Companies Law of ___ (**COUNTRY OF FOREIGN ENTITY**) ___,
(Country Name)

and having its registered office at _____ (**FOREIGN ENTITY ADDRESS**) _____,
(Company Location)

has made, constituted and appointed ___ (**USA AGENT OF THE FOREIGN ENTITY**) ___, who is a
(Local office / agent if any NOT SEKO)

resident Corporation of the United States as the true and lawful agent, representative and attorney of said Corporation in the United States and by these presents hereby entrust SEKO Customs Brokerage Inc., or any of its subsidiaries/partners with full powers of authorization to act the following for Customs purposes:

1. To act in all Customs collection districts of the United States of America and to have all powers referred to in the U.S. Customs form 5291. To perform on behalf of the said company any and all acts specified in U.S. Customs form 5291, Corporation Power of Attorney.

2. To accept service of process in the United States of America on Behalf of _____ (**FOREIGN ENTITY**) ___ (Company Name).

3. To file protests under section 514 of the Tariff Act of 1936.

4. To issue Powers of Attorney on U.S. Customs form 5291 authorizing a qualified resident or residents of the United States to perform on behalf of the said company, all aspects specified in U.S. Customs form 5291.

5. To appoint a sub-agent or sub-agents to handle matters with the U.S. Customs with powers similar to those granted to above.

We _____ (**FOREIGN ENTITY**) _____ hereby undertake to ratify
(Company Name)

and confirm everything, which the aforesaid attorney shall lawfully do or purport to do by virtue of these presents.

Issued by: ___ (**FOREIGN ENTITY COMPANY NAME**) ___

Name/Title: ___ (**OFFICER OF THE COMPANY**) ___

Signature: _____ Date: _____