**Consulate General of Pakistan-Chicago**

**333. N. Michigan Ave.Suit 728**

**Chicago IL, 60601**

**Consular Section**

**Application for Power of Attorney (POA)**

**Date: …………..**

**Executants Details**

**Name:** …………………………………… ……………………………………………..

**Father’s Name:** …………………………………………………………………………

**CNIC/NICOP NO:** ……………………………… ……………………………………..

**Phone:** …………………………………………………………………………………….

**Email:** ……………………………………………………………………………………

**Address:** …………………………………………………………………………………

……………………………………………………………………………………………

COPY OF EXECUTANT’S CNIC/NICOP REQUIRED

**01 PASSPORT SIZE PHOTO.**

**Executants.**

Signature: ------------------------- Thumb: ------------------

**Attorney/Appointee’s Details**

**Name:** ……………………………………… ………………………………………………

Father’s Name:……………………………………………………………………………….

**CNIC/NICOP NO:** ……………………………….……………………………………………

**Phone:** ……………………………………………………………………………………..

**Address:** ……………………………………………………………………………………

………………………………………………………………………………………………

COPY OF ATTORNEY’S CNIC/NICOP REQUIRED

PLEASE CIRCLE: WHERE IN PAKISTAN WILL THE POA BE SUBMITTED?

**ISLAMABAD KARACHI LAHORE PESHAWAR QUETTA**

**FOR OFFICIAL USE**

DIARY NO:………...

DATE:………………