

Authorized Signatory Details Format

Organization Information

Organization Name	
Registered Address	
Registration Number	
Contact Number	

Authorized Signatory Details

Name	Designation	Email	Mobile Number	Specimen Signature

Declaration

I/We hereby declare that the above-mentioned person(s) is/are the authorized signatory/signatories for the above-mentioned organization, and are entitled to sign documents and carry out transactions on behalf of the company/firm/entity.

Place:

Date:

Authorized Signatory

(Signature & Company Seal)

Important Notes

- This document must be printed on the official letterhead of the organization.
- Each authorized signatory's specimen signature should be provided in the designated area.
- Any changes to authorized signatories must be notified in writing immediately.
- Supporting documents such as Board Resolution or Power of Attorney should be attached if required.
- The form must be duly signed and stamped by competent authority.