Mask Name:

I (Individual Authority Name), hereby declare that I am an official representative of (Company Name), Address, (Company Address) Incorporated under companies ordinance of Pakistan holding NTN number (Company NTN). On behalf of (Company Name), I (Individual Authority Name) authorize to use the brand name (Mask Name) to carry out communication with our clients and ignore all duplicate requests received to PTA for above mentioned Mask Name**.**

We also agree to the terms and conditions outlined in the agreement.

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation:­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_