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Uzņēmuma, iestādes, organizācijas nosaukums

Reģistrācijas Nr. \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

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juridiskā adrese, tālr. Nr.

turpmāk tekstā KLIENTS.

**PILNVARA**

Rīgā

202\_. gada \_\_.\_\_\_\_\_\_\_\_\_\_\_. Nr.\_\_\_\_

Pilnvaroju sekojošas personas:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_ \_ \_ \_ \_ **-** \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Pilnvarotās personas vārds, uzvārds personas kods tālrunis e-pasts*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_ \_ \_ \_ \_ **-** \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Pilnvarotās personas vārds, uzvārds personas kods tālrunis e-pasts*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_ \_ \_ \_ \_ **-** \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Pilnvarotās personas vārds, uzvārds personas kods tālrunis e-pasts*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ \_ \_ \_ \_ \_ **-** \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Pilnvarotās personas vārds, uzvārds personas kods tālrunis e-pasts*

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*Pilnvarotās personas vārds, uzvārds personas kods tālrunis e-pasts*

KLIENTA vārdā veikt visas darbības un kārtot formalitātes nomas materiālu iegūšanai no **Ramirent Baltic AS Rīgas filiāle** (reģ. Nr. 40103238352) t.sk. KLIENTA vārdā parakstīt pieņemšanas–nodošanas aktus, bojājuma ziņojumus, servisa aktus, defektācijas aktus, saņemt materiālus un nomas inventāru, veikt pasūtījumus.

Pilnvara derīga līdz 202\_. gada \_\_.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

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*uzņēmuma, iestādes, organizācijas vadītāja amats paraksts vārds, uzvārds*

Ramirent Baltic AS Rīgas filiāle apstrādā personas datus saskaņā ar klientu privātuma politiku, ar kuru var iepazīties mūsu mājas lapā [www.ramirent.lv/privacy](http://www.ramirent.lv/privacy) vai nomas punktā.

Ar savu parakstu \_\_\_\_\_\_\_\_\_\_\_\_\_apliecinu, ka esmu izlasījis/-usi un sapratis/-usi iepriekš minēto.

*paraksts*