

AUTHORIZATION

I, _____, declare I have full knowledge that:

a.) The Consulate-General of Brazil in Hartford, CT does not charge any additional taxes or fees for the services offered, other than those of the consular fees mentioned on the following website (<http://hartford.itamaraty.gov.br/pt-br/visas.xml>) or informed through our automated system at 860 760 3100 (option 2 for English) or through our e-mail cghartford@itamartay.gov.br

b.) I hereby authorize the Consulate General of Brazil in Hartford, CT, to deliver the documents mentioned below to the following designated individual _____.

c.) The Consulate is not responsible for any loss or damage to such documents once delivered to the individual mentioned above.

() Legalization of Documents

() Visas

d.) The Consulate General of Brazil in Hartford, CT can only legalize documents issued or notarized in its jurisdiction, the states of Connecticut and Rhode Island.

e.) Finally I **AUTHORIZE** _____ to deliver and pick up the documents mentioned above and I declare that I have reviewed and approved the application form(s) necessary for the processing of these documents.

Hartford, ____ de _____ de 2011.

Signature

Received ____/____/____.