CMC/SOLICITORS LETTER OF AUTHORITY FORM



AviationADR Case ID:	
AviationAbit case ib.	

Please complete this form if you ("the Complainant") want to authorise a third-party claims management company to act on your behalf ("the Authorised Person"). However, you should first check whether they will charge you for this service.

You can change or cancel this authority at any time by contacting us on the portal.

Declaration:

- I authorise the Authorised Person to act on my behalf in relation to my complaint.
- I understand that any information given to the Authorised Person will be deemed to have been given to me.
- I give permission to the Authorised Person to discuss all aspects of my complaint on my behalf.
- I confirm the Authorised Person is entitled to make decisions on my behalf concerning acceptance of a determination or award provided, if appropriate.
- I understand that any agreement between the third party and I is separate to the complaint lodged with AviationADR.

Please be aware that AviationADR does not accept liability for disputes that may arise regarding payment of compensation between the Airline and the third-party.

About you, the Complainant:		
Name:	Signature:	Date: //
Name:	Signature:	Date: //
Name:	. Signature:	Date: /
Name:	. Signature:	Date: //
Name:	Signature:	Date: //
* Please use a second Letter of Authority form i	if required	
About the Authorised Person:		
Authorised Person's title:	First name:	Last name:
Full postal address:		
Email address:	Telephone number:	Alternate telephone number:
Airline name:		Booking reference:
Flight number:		Date of flight: