Power of attorney - financial assistance



If you want someone to help you contact NAV, you can authorise a person you trust (grant them power of attorney) to do it for you. You can send the power of attorney as an attachment to your digital application for financial assistance or deliver it at your local NAV office. The power of attorney can only be used in contact with that NAV office which you deliver the power of attorney to.

The power of attorney is granted by	
Name:	ID number (11 digits):
Address:	Telephone number:
Postal code and place:	
The power of attorney is granted to	
Name:	ID number (11 digits):
Address:	Telephone number:
Postal code and place:	
	ney uthorization for, and for which period the power of attorney applies. For example, o obtain information about your case, apply or complain on your behalf. Yes No If [Yes], state the period of time:
for a spesific period of time?	Tes No in [163], state the period of time.
Can the person you authorize apply or co	omplain to decisions on your behalf?
Do you want to limit the information whi	ich can be shared? Yes No
If [Yes], what information can be share	d between NAV and the person you authorize?
You can also write which information c	cannot be shared between NAV and the person you authorize:
Other information If you have more information to share, you	ou can write it here:
Confirm and sign	
I have granted the power of attorney	voluntarily. I am aware that I can withdraw it in whole or in part at any time.
Date: Signa	ature:

NAV is bound by a duty of confidentiality since your case contains sensitive personal information. We cannot exchange information about you with others without your formal permission to do so. The duty of confidentiality follows from the Public Administration Act §§ 13 - 13f, the Employment and Welfare Administration Act § 7, the Social Services Act § 44, the Health and Care Services Act § 12-1 and other laws that regulate the tasks of the social services.