

Revocation of power of attorney

Use this form if you want to revoke a power of attorney from the Swedish Migration Agency.

You cannot use this form to revoke a power of attorney that you have given to your public counsel.

Power of attorney for a representative is hereby revoked

Surname, first name
Date of birth/Personal Identity Number (year, month, day)
Address

The revocation takes effect

(mark with a cross)

- immediately
- starting on

My personal information and signature

Surname, first name	File number
Date of birth/Personal Identity Number (year, month, day)	
Address	
<p>.....</p> <p>Place and date</p>	
<p>.....</p> <p>Signature</p>	