

# The Emirates High Street

## LETTER OF AUTHORISATION

**Purchaser:** please ask your authorised party to bring your dispatch confirmation with airway bill number for collection.

**Authorised Party:** please carry either your driver's license, your Government issued ID or your passport to collect for purchaser.

Family Name:

Family name:

First Name:

First name:

Address:

Address:

Country:

Country:

Phone Number:

Phone Number:

Skywards / EHS ID:

Identification Type:

Airway Bill No:

Identification Number:

### Order Information

Quantity	Products Ordered

### Authorisation Declaration by purchaser

I hereby authorise and permit Mr/Mrs/Miss:

\_\_\_\_\_ (First and Last Name)

to pick-up the above ordered goods on my behalf.

Date & Signature of Purchaser:

Toll Free UAE: 600 544000

Collection Point Dubai: Aramex, Airport Road, next to the Garhoud main traffic light, Dubai  
Opening hours: Saturday to Thursday: 08:00 am to 12:00 midnight, Friday: 08:00 am to 10:00 pm

