

## Power of attorney

This form is a notification of an appointment or change of representative

Most fields are mandatory. Fill out fields in the form marked • where applicable. Fill in the form using capital letters or type it. Please do not staple the pages together. See separate notes to the form.

patent trademark design  
**Norwegian Industrial  
Property Office**



Sandakerveien 64  
Pb. 8160 dep 0033 Oslo  
Telephone +47 22 38 73 00  
Info center +47 22 38 73 33  
mail@patentstyret.no  
www.patentstyret.no  
Bank account 8276 01 00192  
Org.no. 971526157 MVA

### Subject area

One subject area per form only.

☐ Trademark ☐ Design ☒ Patent

### Application/ registration number

The power of attorney applies to the following application/registration: (Please use the list on the next page if the list below is not sufficient.)

Appl. No./Reg. No./Patent No. Trademark/design/title of patent  
EP2507042

Appl. No./Reg. No./Patent No. Trademark/design/title of patent

**Attachments •** ☐ Check box if additional documentation is attached.

### Change of representative •

☐ This is a notification of change of representative.

Your reference regarding this notification:  
P23752NOEP

### Representative

I/we hereby authorize:

Given name/Company name:  
ONSAGERS AS

Surname:

Address:

Postal code:

City:

Country:

Organisation number, if company:

Customer ID:

1075

the power to file an application and represent me/us in everything concerning it, and after the application has been registered, to receive announcements and other procedural communications relating to it. I/we hereby also confer upon the representative the right to withdraw the application, partially or totally, and to request a partial or total cancellation of the protection. This power of attorney includes divisional and separate applications and protection obtained on the basis of such applications. The representative is authorised to transfer this power of attorney to another agent.

### Applicant/ holder

Given name/Company name:  
Elas Geotecnica S.r.l.

Surname:

Address:

Centro Commerciale San Felice - Lotto 3/21

Postal code:  
20090

City:  
Segrate (MI)

Country:  
ITALY

Organisation number, if company:

Customer ID:

### Signature

Place:

Date:

Signature (the holder or his/her representative):

Milano, Italy

18 April 2014

For insertion of the representative's logo (optional)

onsagers

FIRMA  
LEGGIBILE