The consent letter from the director nominee Page

	Date
1	hereby consent to be nominated for consideration as
or of ATP 30 Public Company Limited	d ("the Company") and I am certified that I has the suitable qualifications for appoir
ector of the Company.	
In this regard, I am hereby consen	nt and certify that I am fully qualified and do not possess any prohibited characteris
the criteria of the rules as required by	by the Capital Market and Supervisory Board's Notification Tor. Jor. 24/2552 Re:
ription of Prohibited Characteristics o	of Issuing Company's Director and Executive dated 20 July B.E. 2552. I attached
ith the copies of identification card /	copies of passport.
I would like to inform useful informa	ation for Board consideration as follows:
Name-Surname	
Nationality	
Date of Birth	Age years
Address	
Education	
Year	Institution
orking Experiences (During the past	Position/company/division
Current directorship / partnership	position in other companies, limited partnerships, ordinary partnership.
Company/ Limited Partnership/ ord	dinary partnership
Please specify the type of committee	ree/partnership
[] Company Director	
[] AIII OIII	[] Executive Committee
[] Audit Committee	[] Executive Committee[] managing partner/ unlimited liability partner
[] limited liability partner	
[] limited liability partner	[] managing partner/ unlimited liability partner
[] limited liability partner	[] managing partner/ unlimited liability partner [] Other (specify)
[] limited liability partner Company/ Limited Partnership/ ord	[] managing partner/ unlimited liability partner [] Other (specify)
[] limited liability partner Company/ Limited Partnership/ ord Please specify the type of committed	[] managing partner/ unlimited liability partner [] Other (specify)

The consent letter from the director nominee Page

	Company, Limited Partnership, ordinary partnership							
	Pleas	Please specify the type of committee/partnership						
	[](Company Director]] Executiv	ve Committee			
	[]	Audit Committee]] managi	ng partner/ unlimited liability partner			
	[] [imited liability partner]] Other (s	specify)			
	Company/ Limited Partnership/ ordinary partnership							
	Please specify the type of committee/partnership							
	[](Company Director	[] Executiv	ve Committee			
	[]	Audit Committee]] managi	ng partner/ unlimited liability partner			
	[] [imited liability partner]] Other (s	specify)			
(9)	Training experience from Thai Institute Directors of Thailand							
	[]	No						
	[]	es, course taken						
(10)		eholding in ATP 30 Public C	Company Limited who not yet become legal age)					
	[]	No]] Yes	shares			
	Spou	se Name		Nur	mber of shares owned			
	Child	lren who not yet become leg	al age					
	1.				years			
		Number of shares owned	I					
	2.				years			
		Number of shares owned	I					
	3.				Age years			
		Number of shares owned	ı					
(11)	Addit	tional information (if any)						
true in		ify that the information provi			pporting documents submitted herewith are correct, completed and my signature.			
					Shareholder's signature			
				()			