APPLICATION
to gain access to the data

APPLICANT – legal person	
Name of the legal person:	
Registration code:	
Location (address):	
Representative (name and surname, PIN or date of birth)[1]:	
E-mail and phone number:	

APPLICANT – natural person	
Name and surname:	
PIN or date of birth:	
Place of residence:	
E-mail and phone number:	

Date of payment of the state fee and document number (to be added):	

To be filled in block letters if in handwriting!

REQUESTED DATA	
Name and surname of the person, PIN or date of birth, place of residence and other data	

COMPOSITION OF THE DATA

☐	surname(s)		☐	name(s)		☐	sex	
☐	date of birth		☐	place of birth		☐	PIN	
☐	citizenship		☐	residence rights and period		☐	e-residence and period	
☐	place of residence		☐	means of communication[3]		☐	marital status	
☐	custody rights		☐	guardianship status		☐	legal capacity status	
☐	data on death (excluding cause of death)		☐	PINs of parents and children				

OTHER REASONS

JUSTIFICATION FOR THE APPLICATION (Population Registry Act Article 49 (3))

Please explain the purpose, time and manner of using the data!

Indicate method of access:					
☐	via e-mail	☐	via mail (on paper)	☐	in person

I hereby certify that the data received shall only be used for the purpose, during the time and in the manner applied for, and in compliance with other conditions determined upon the release of the data.

I hereby certify that all the data provided herein is correct to the best of my knowledge.

Applicants signature:	☐ Application is signed digitally
Date of application:	