

FORM no. 5 - APPOINTMENT OF PROXY

APPOINTMENT OF PROXY TO REQUEST A CERTIFICATE OR STATEMENT OF REGISTERED DATA

APPOINTMENT OF P R O X Y to:

PLEASE FILL IN BLOCK CAPITAL LETTERS
With the data of the person appointed as proxy

SURNAME/FAMILY NAME _____

Forename(s) _____

Date of birth: day _____ month _____ year _____

Municipality of birth _____

State of birth, if born abroad _____

Place of residence (town / village) _____ State, if abroad _____

Tax Identification Code [codice fiscale] _____

- to submit the relevant application on my behalf
 to collect the certificate or statement requested, even if it contains data

or

- to collect the certificate or statement requested, only if it does not contain data

Enclosed herein is a photocopy of the identification document specified below of the person appointing the proxy (i.e. the proxy granter).

- Enclosed herein is a photocopy of the identification document of the person appointed as proxy

or

- The person appointed as proxy shows the following identification document:
type: _____
number: _____
issued by: _____
on: day _____ month _____ year _____

date _____

signature of the person appointing the proxy _____