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| **CENTAR ZA SOCIJALNU SKRB ĐURĐEVAC**  **GAJEVA 6, 48350 ĐURĐEVAC**  **048/812-103, fax: 048/812-613** | **Prostor  za biljeg** |

**Z A H T J E V**

**za izdavanje potvrde o evidenciji osoba pod skrbništvom**

**PODACI O PODNOSITELJU ZAHTJEVA**

*(molimo vas da sve podatke unesete čitko)*

**Ime** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Prezime** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OIB** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Datum, mjesto i godina rođenja** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Adresa prebivališta** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Adresa boravišta** *(stanovanja)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Broj osobne iskaznice, mjesto i datum izdavanja** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Broj mobitela ili telefona** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PODACI O OSOBI KOJA PODNOSI ZAHTJEV U IME KORISNIKA

*(kad se podnosi zahtjev za drugu osobu)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ime i prezime, OIB** |  | | | | |
| **Srodstvo s korisnikom za kojeg podnosite zahtjev**  *(izaberite i označite oznakom „X“)* | roditelj | partner | dijete | skrbnik | drugo |
|  |  |  |  |  |
| **Adresa podnositelja** |  | | | | |
| **Telefon/ mobitel** |  | | | | |
| **Broj osobne iskaznice** |  | | | | |

**Potvrda mi je potrebna u svrhu** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

U Đurđevcu, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Potpis podnositelja zahtjeva

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Potrebno priložiti:**

* **Pristojba u državnim biljezima u vrijednosti od 40,00 kn** prema Tar. broj 1 (20 kn na zatjev) i Tar. broj 4 (20 kn za uvjerenje) Tarife upravnih pristojbi Zakona o upravnim pristojbama (NN 115/16)

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