SUBJET: APPLICATION FOR DISMISSAL OF THE CODE OF THE ROAD INFRINGEMENT ASSESSMENT NOTICE

I, the undersigned, _____ born on ____/____/_____ in _____ and resident in _____ , ID Card n° _____ issued by_____, telephone number _____, e-mail _____ @ _____, in my capacity as_____

ASK THE DISMISSAL OF THE UNDERMENTIONED CODE OF THE ROAD INFRINGEMENT ASSESSMENT NOTICE FOR THE FOLLOWING REASON

Please mark the check box related to the reason and write down the notice number	*MINUTE NUMBER*	*NOTIFICATION DATE*
☐ *The vehicle had been stolen at the date of the infringement; attached to this document is the copy of the vehicle theft report and/or the notice of finding and/or the recording of possession loss*		
☐ *The vehicle was not my property at the date of of the infringement; attached to this document is the sale deed*		
☐ *Wrong plate number recognitioon*		
☐		

I also declare to be informed, pursuant to and in accordance with D. Lgs. N. 196/2003, that my personal data will be collecetd and processed , also with the use of data processing systems, only within the framework of the procedure for which the present declaration is given.

Place _____   Date___/____/_____   **SIGNATURE** (legible and in full)

_____

Indicate how to send the request:
☐ hand delivery to the institution's protocol
☐ by register letter
☐ by e-mail: infopm@comune.ferrandina.mt.it