Corpo di Polizia Municipale Piazza Plebiscito 12 75013 Ferrandina (MT)

I, the undersigned,		resident in	, ID Card n°
	issued by	on//	, in my capacity
as	(please s	cpecify the position – i.e. direclty ir	iteressed , delegated, etc)
DELEGATE			
Mr / Mrs		resident in	, ID Card n°
	issued by	on//,	
ТО			
\Box look over the legitin	nated state		
\Box ask for the issue of a	a simple copy with/w	vithout attachments	
□ ask for the issue of a	an authenticated cop	by with/without attachments	
of the following file			
Reason:			
TO THIS END I UNTDER	TAKE TO PAY THE P	OSSIBLE DUE COMPENSATION	
		Signature for delegation	
For authorization			
The delegator		The delegated	

Important notice: By law D.lgs 196 of 20/06/03 and subsequent modifications we inform that the present data are strictly relevant and indispensable to excercise the right of access to the files an that they will be used only for internal use to allow the concerned person identification for a period not greater than the one expected for the objectives for which they have been collected.

(Please attach copy of the delegator identity card)