**Załącznik nr 5**

WZÓR FORMULARZA ZGŁOSZENIA UTRATY LUB USZKODZENIA

ZAŚWIADCZENIA O ZAREJESTROWANIU POBYTU OBYWATELA UNII EUROPEJSKIEJ

LUB KARTY POBYTOWEJ

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(miejscowość i data) / (location and date) / (lieu et date)

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(oznaczenie organu, do którego składane jest zgłoszenie) /

(name of the authority to which the application is filled) /

(désignation de l'autorité à laquelle la demande est déposée)

**ZGŁOSZENIE UTRATY LUB USZKODZENIA** /

**NOTIFICATION OF LOSS OR DAMAGE OF** /

**NOTIFICATION DE PERTE OU DE DÉGRADATION DE**

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|  | ZAŚWIADCZENIA O ZAREJESTROWANIU POBYTU OBYWATELA UNII EUROPEJSKIEJ / CERTIFICATE OF REGISTERING THE RESIDENCE OF A EUROPEAN UNION CITIZEN / CERTIFICAT D'ENREGISTREMENT DU SÉJOUR D'UN RESSORTISSANT DE L'UNION EUROPÉENNE\* |
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|  | KARTY POBYTOWEJ / RESIDENCE CARD / CARTE DE SÉJOUR\* |
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1. RODZAJ ZGŁOSZENIA / TYPE OF NOTIFICATION / TYPE DE NOTIFICATION\*

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|  | UTRATA / LOSS / PERTE |  | USZKODZENIE / DAMAGE / DÉGRADATION |
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1. IMIĘ (IMIONA) / FORENAME (FORENAMES) / PRÉNOM (PRÉNOMS)

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1. NAZWISKO (NAZWISKA) / SURNAME (SURNAMES) / NOM (NOMS)

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\* Właściwe zaznaczyć znakiem „X”. / \* Tick the appropriate mark with „X”. / \* Cochez la case appropriée avec un „X”.

1. DATA URODZENIA / DATE OF BIRTH / DATE DE NAISSANCE

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1. MIEJSCE URODZENIA / PLACE OF BIRTH / LIEU DE NAISSANCE

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1. OBYWATELSTWO / CITIZENSHIP / CITOYENNETÉ

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1. PŁEĆ / SEX / SEXE

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1. ADRES MIEJSCA ZAMELDOWANIA NA POBYT STAŁY LUB CZASOWY (JEŚLI MA ZASTOSOWANIE) / REGISTERED ADDRESS FOR PERMANENT OR TEMPORARY RESIDENCE (IF APPLICABLE) / ADRESSE DU DOMICILE POUR SÉJOUR PERMANENT OU TEMPORAIRE (LE CAS ÉCHÉANT)

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1. NUMER PESEL (JEŚLI ZOSTAŁ NADANY) / PESEL NUMBER (IF GRANTED) / NUMÉRO PESEL (SI ATTRIBUÉ)

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(podpis zawiadamiającego) /

(signature of the applicant) / (signature du demandeur)

POUCZENIE / INSTRUCTION / INSTRUCTION

Formularz należy wypełnić kolorem niebieskim lub czarnym, wielkimi literami, z zachowaniem zasady: 1 kratka – 1 litera, a następnie własnoręcznie podpisać.

The form must be completed in blue or black colour, in block letters, in accordance with the principle: 1 square – 1 letter, and then duly signed.

Le formulaire doit être rempli à l’encre noire ou bleue et en caractères d’imprimerie, à l’intérieur des carrés (1 carré – 1 lettre), et ensuite signé par lui-même.