**Ф-01/ІК-47/11/23**

**Департамент соціальної та ветеранської політики Луцької міської ради**

**Від кого (відомості про фізичну особу)**

Прізвище

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По батькові

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Адреса

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Контактний номер телефону

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**ЗАЯВА**

Прошу розмістити фото мого\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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ПІП загиблого (померлого)

у секції "Герої Нескореної України" пам'ятного фотостенду "Герої Небесної Сотні—Загинули за єдність України".

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| **Перелік документів, що додаються:** | | |
| 1.Паспорт громадянина України заявника та документ, що підтверджує місце реєстрації (копія).  2.Свідоцтво про смерть військовослужбовця.  3.Документ, що підтверджує родинні стосунки.  4.Документ, який підтверджує місце реєстрації або фактичне місце проживання загиблого (померлого).  5.Світлина загиблого (померлого) військовослужбовця.  *Відповідно до Закону України “Про захист персональних даних” надаю згоду на обробку моїх персональних даних.* | | |
| (дата) |  | (підпис) |