**Ф-01/ІК-30/11/15**

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

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

 Прізвище

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 Ім’я

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 По батькові

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 **Адреса**

Область

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 Місто/село/селище

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 Вулиця, проспект, провулок

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 Номер будинку, квартири

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 Номер контактного телефону

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**З А Я В А**

Прошу забезпечити безоплатне спорудження надгробку (за встановленим зразком) на могилі померлої (загиблої) особи\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*(Прізвище, ім’я, по батькові померлої/загиблої особи)*

яка має особливі заслуги та особливі трудові заслуги перед Батьківщиною

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*(Вказати нагороди померлої/загиблої особи)*

шляхом відшкодування вартості виготовлення та встановлення надгробку виконавцю послуг.

*Відповідно до Закону України «Про захист персональних даних» надаю згоду на обробку моїх персональних даних виключно з метою безоплатного спорудження надгробку на могилі померлої/загиблої особи з особливими заслугами та особливими трудовими заслугами перед Батьківщиною.*

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 Дата Підпис