И.О. Главы Администрации муниципального образования города федерального значения Санкт-Петербурга муниципального округа «Александровский» **М.В.Козициной** от \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Зарегистрированного (ой) по адресу: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ тел.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ЗАЯВЛЕНИЕ**

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Даю согласие на обработку и использование моих персональных данных, содержащихся в настоящем заявлении и в предоставленных мною документах.

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дата подачи заявления подпись фамилия и инициалы