**APPLICATION of a legal person for the receipt of Credit Register data as a registered mail delivery**

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| --- | --- | --- | --- |
| Name  *(mandatory)* | |  | |
| Registration No.  *(mandatory)* | |  | |
| Registered address  *(mandatory)* | |  | |
| Recipient's name and surname  *(mandatory)* | |  | |
| Delivery address  *(mandatory)* | |  | |
| Telephone number  *(mandatory)* | |  | |
| E-mail address | |  | |
| Please prepare the report in the following language: Latvian  English | | | |
| I hereby acknowledge that:  1) I would like Credit Register data to be sent as a registered mail delivery at the delivery address indicated above where it is in the European Union or European Economic Area country;  2) a postal service fee is transferred to Latvijas Banka. | | | |
| Signature |  | |
| Signatory |  | |
| Date |  | |

The position "signature" herein need not be filled in where the application has been drafted as an electronic document in accordance with the legislative requirements governing the execution of electronic documents.