



Place and date of preparation

Mayor/City President* in

Appendix No. 2

Application for inclusion in the permanent voting district

Based on Article 19a § 1 of the Act of 5 January 2011 – Electoral Code (Journal of Laws of 2022, item 1277, as amended) I request to be included in the permanent voting district

1. Data for the application for inclusion in the permanent voting district

Last name

Name(s)

Citizenship

Passport or other document number

confirming identity

PESEL number

(if you do not have a PESEL number, complete the second part of the application)

I declare that I am permanently resident** in:

Municipality (city, district)

Town

Street

House number

Apartment number

2. Data required to assign a PESEL number

Sex:

☐ woman ☐ man

Foreigner status

(check the appropriate box):

☐ EU – a citizen of the European Union and a citizen of the United Kingdom of Great Britain and Northern Ireland, as referred to in Article 10(1)(b) and (d) of the Agreement on the withdrawal of the United Kingdom of Great Britain and Northern Ireland from the European Union and the European Atomic Energy Community (OJ EU C 384, 12.11.2019, p. 7).

☐ NUE – a citizen of the United Kingdom of Great Britain and Northern Ireland other than the one referred to in Article 10(1)(b) and (d) of the Agreement on the withdrawal of the United Kingdom of Great Britain and Northern Ireland from the European Union and the European Atomic Energy Community.

* Delete where not applicable.

** In the case of a voter with no residence, referred to in Article 19a § 10 of the Act of 5 January 2011 - Electoral Code, who permanently resides in the territory of a given commune, the address at which the commune office employees can contact him/her is entered.



Please complete the information below if available

Parents' details

Mother's name (first)	.....
Mother's maiden name	.....
Mother's PESEL number (if assigned)	.....
Father's name (first)	.....
Father's maiden name	.....
Father's PESEL number (if assigned)	.....

Applicant's details

Date of birth	.....
Place of birth	.....
Marital status	☐ single ☐ married ☐ widower/widower
Birth certificate designation	.....
Office designation marital status in which a birth certificate was prepared	.....

Details of the applicant's spouse

Spouse's name	.....
Spouse's maiden name	.....
Spouse's PESEL number (if granted)	.....
Date of conclusion marriage	.....

Marriage details

Marriage certificate designation	
Office designation marital status in which a marriage certificate was drawn up	.....

Data on the dissolution of marriage

Date of dissolution of marriage	.....
The file reference number and the name of the court that dissolved the marriage	.....
File reference number and designation of the court that filed the case established the non-existence of the marriage	.....
The file reference number and the name of the court that annulled the marriage	.....

Details of the spouse's death

Date of death of the spouse or date of discovery of his/her body

Spouse's death certificate designation

The designation of the registry office where it was registered the spouse's death certificate was prepared

.....
Signature

I consent to the transfer of my data to the contact data register, i.e. name, surname, PESEL number and:

mobile phone number

or

e-mail address

If you consent to the transfer of your data to the contact details register, please complete at least one field above.

You can express your consent if you are submitting the request on your own behalf. Providing your data to the contact details register is not mandatory. It may enable other entities (e.g., government offices) to contact you quickly to efficiently resolve your matter and inform you of the actions they are taking regarding your matters. You can withdraw your consent at any time.

.....
Date and signature

