



☐ REGISTRATION OF PERMANENT ADDRESS ABROAD

☐ REGISTRATION OF TEMPORARY ADDRESS ABROAD

☐ RENEWAL OF TEMPORARY ADDRESS ABROAD

☐ DE-REGISTRATION OF TEMPORARY ADDRESS ABROAD

(mark as appropriate)

First and Last Name	
EMŠO/ Date of Birth	

Old/Current Permanent Address

Country	
Street Address & Apt. Number (if applicable)	
City	
State	
ZIP Code	

New Permanent/Temporary Address

Country	
Street Address & Apt. Number (if applicable)	
City	
State	
ZIP Code	

I live/will live at the above address from: (date)	
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First and Last name of a Legal or Authorised Representative	
EMŠO /Date of Birth of the representative	

Date	
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By signing this form the client or their legal representative is confirming the truthfulness of the above information:

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