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| **ZAHTJEV ZA POJEDINAČNU DOZVOLU ZA PRIJENOS**  **APPLICATION FOR INDIVIDUAL TRANSFER LICENCE** | | | **MG-ZPDP**  Prijemni žig | | | | |
| ZAHTJEV BR:  APPLICATION No: | | |
| 1. DOBAVLJAČ (NAZIV I ADRESA)  SUPPLIER (NAME AND ADDRESS) | Identifikacijski broj:  Identification No: | | 2. PRIMATELJ (NAZIV I ADRESA)  RECIPIENT (NAME AND ADDRESS) | | Identifikacijski broj:  Identification No: | | |
|  | | |  | | | | |
| 3. POSREDNIK/ IME I ADRESA:  BROKER/ NAME AND ADDRESS: | Identifikacijski broj:  Identification No: | | 4. KRAJNJI KORISNIK/ IME I ADRESA:  END USER/ NAME AND ADDRESS: | | Identifikacijski broj:  Identification No: | | |
|  | | |  | | | | |
| 5. OPIS ROBE:  DESCRIPTION OF GOODS: | | | TARIFNA/ ML OZNAKA  CN CODE / ML CODE: | KOLIČINA:  QUANTITY: | | VRIJEDNOST ROBE:  VALUE OF GOODS: | |
|  | | |  |  | |  | |
| 6: RJEŠENJE MUP-a:  APROVAL No: | | | 7. VEZA: (CONNECTING DOCUMENTS)  Uvozna dozvola br. (IIC No.)  Potvrda okrajnjem korisniku (EUC No.) | | | | |
| 8. BROJ REGISTRACIJE TRGOVAČKOG SUDA:  REGISTRATION No BY COMMERCIAL COURT: | | | | | | | |
| 9. Ime i prezime podnositelja zahtjeva (tiskanim slovima):  Name of applicant (in capitals):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 10. DATUM I PEČAT:  DATE AND STAMP:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| 11. Ime, prezime i titula odgovorne osobe (tiskanim slovima):  Name and Title of Authorised Person (in capitals):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 12. Vlastoručan potpis odgovorne osobe:  Signature of Authorised Person:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| 13. OVAJ ZAHTJEV JE: (THIS APPLICATION IS:)  \_\_\_ ODOBREN (APPROVED)  \_\_\_ ODBIJEN (REJECTED) | | 14. POTPIS (SIGNATURE)  MORH (Ministry of Defence)  MUP (Ministry of the Interior)  MVEP (Ministry of Foreign and  European Affairs)  MINGOR (Ministry of Economy and  Sustainable Development)  MF- Carinska uprava (Ministry of  Finance - Customs Administration ) | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_ |