

## TAX-PAYER'S REQUEST TEMPLATE

### REQUEST FOR LEGALIZATION OF THE DOCUMENT

**Name and surname of the tax-payer or name of the company**

Address of residence or seat

Date of birth or TIN

Contact information (telephone, e-mail address)

**Tax Office for \_\_\_\_\_ region**

Local Tax Administrator in \_\_\_\_\_

Address

**Request for legalization of the document „the document title“**

We/I ask you to verify the document(s) „the document title, reference number (if any)“ for the purpose of \_\_\_\_\_ in the state of \_\_\_\_\_ (specify the purpose, and the name of the state, for which the legalization is required)

*For example:* for the purpose of obtaining an apostille from the Ministry of Foreign Affairs and subsequent recognition of the documents in the state of XY.

Please send the verified document to the address \_\_\_\_\_ or contact me on the phone number \_\_\_\_\_ so that I can personally pick up the document at the General Financial Directorate (Generální finanční ředitelství), Lazarská 15/7, 117 22 Praha 1.

Application submitted in (place) / on the day: \_\_\_\_\_

Signature of the tax-payer (of the authorized person): \_\_\_\_\_