**OPĆINA LOVREĆ**

**Jedinstveni upravni odjel**

**Doktora Franje Tuđmana 7, 21 257 Lovreć**

**ZAHTJEV ZA OSTVARIVANJE PRAVA NA GODIŠNJU NOVČANU POTPORU**

**UMIROVLJENICIMA, KORISNICIMA ZAJAMČENE MINIMALNE NAKNADE I NEZAPOSLENIM HRVATSKIM BRANITELJIMA ZA 2024.**

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| **IME I PREZIME****PODNOSITELJA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****ZAHATJEVA** **ADRESA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**OIB****TELEFON/****MOBITEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****TEKUĆI RAČUN**

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**IBAN** **(u slučaju blokiramog računa, priložiti potvrdu FINA-e)** |

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| **I Z J A V A**1. da su svi izneseni podaci istiniti,
2. **da osim navedenog nemam drugih mirovinskih primanja,**
3. da sam suglasan s obradom osobnih podataka shodno važećim propisima
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| **OBVEZNI PRILOZI:**1. **odrezak od posljednje mirovine (hrvatske i inozemne)**
2. **kopija važeće osobne iskaznice**
3. **potvrda o braniteljskom statusu (za nezaposlene hrvatske branitelje)**
4. **potvrda HZMO-a o radnopravnom statusu (za nezaposlene hrvatske branitelje).**
 |

 Lovreć, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2024.g.

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 potpis podnositelja zahtjeva