**Requerimento dirigido ao (a)**

**Presidente**

**da Câmara Municipal de Mogadouro**

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| Assunto:  | **CONSULTAR PROCESSO**  |
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| **IDENTIFICAÇÃO REQUERENTE** |

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| Nome: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Morada: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Código postal \_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_N.º Telefone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telemóvel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cartão do Cidadão/BI nº: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ válido \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Número de Contribuinte: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **OBJETO DE REQUERIMENTO** |

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| Na qualidade de:[ ] Interessado \** De acordo com o definido no artº 110º do RJUE o interessado deverá provar ter interesse legítimo no conhecimento dos elementos que pretendem consultar.

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| Conferi a assinatura pelo BI/CC n.º \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_O Trabalhador(a): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Em: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ |

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| **Informação dos serviços:** Taxa de Apresentação €\_\_\_\_\_\_\_\_\_\_\_ Guia de Receita n.º \_\_\_\_\_\_\_\_\_\_ De \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ | **Despacho:** |