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| ЦВЕТНОЕ |
| ФОТО |
|  |
| (30Х40 мм) |

Приложение № 1  
к приказу ФМС России  
от \_\_\_\_\_\_\_\_\_\_\_\_ № \_\_\_\_\_

**ЗАЯВЛЕНИЕ  
О ВЫДАЧЕ ПАТЕНТА**

(наименование территориального органа ФМС России)

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| Прошу выдать патент для осуществления трудовой деятельности |

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Фамилия:

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Имя:

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Отчество:

(при наличии)

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| Сведения об изменении Ф.И.О.:  (с указанием причины и даты изменения) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Гражданство (подданство):  (или государство постоянного |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(преимущественного) проживания)

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| Место рождения: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(государство, населенный пункт)

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| Дата рождения: |  |  |  |  |  |  |  |  |  |  | Пол: |  | М |  | Ж |

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| Адрес постоянного проживания: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Документ, удостоверяющий личность:  (вид) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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(число) (месяц) (год)

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| кем выдан: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Номер миграционной карты: |  |  |  |  |  |  |  |  |  |  |  |  |  | Дата выдачи |  |  |  |  |  |  |  |  |  |  |

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Адрес постановки на учет по

месту пребывания:

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| Срок постановки на учет по месту пребывания: | с |  |  |  |  |  |  |  |  |  |  | по |  |  |  |  |  |  |  |  |  |  |

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Документ, подтверждающий владение

русским языком, знание истории России и

основ законодательства Российской Федерации: (вид)

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| серия |  |  |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  |  |  |  | дата выдачи |  |  |  |  |  |  |  |  |  |  |

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(число) (месяц) (год)

Трудовая деятельность планируется у: (нужное отметить ):

юридического лица или индивидуального предпринимателя (абзац первый пункта 1 статьи 133 Федерального закона от 25 июля 2002 г. № 115-ФЗ «О правовом положении иностранных граждан в Российской Федерации»)

физического лица – гражданина Российской Федерации (абзац второй пункта 1 статьи 133 Федерального закона от 25 июля 2002 г. № 115-ФЗ «О правовом положении иностранных граждан в Российской Федерации»)

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Профессия (специальность, должность, вид трудовой деятельности), по которой планируется осуществление трудовой деятельности:

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Предполагаемый срок осуществления трудовой деятельности в Российской Федерации:

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Сведения о ранее выданном патенте (заполняется в случае получения патента для осуществления трудовой деятельности на территории другого субъекта Российской Федерации):

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Патент выдан:

(наименование территориального органа ФМС России, выдавшего патент)

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| Патент: серия |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Бланк патента: серия |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Срок действия: с |  |  |  |  |  |  |  |  |  |  |  | по |  |  |  |  |  |  |  |  |  |  |

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Контактный телефон:

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Заявление подается: (нужное отметить ):

лично через лицо, выступающее в соответствии через уполномоченную субъектом

с гражданским законодательством Российской Российской Федерации организацию

Федерации в качестве представителя

иностранного гражданина

Мне разъяснено, что указание в заявлении неправильных (ложных) сведений может повлечь за собой отказ в выдаче патента.

Подтверждаю достоверность указанных мною в заявлении сведений.

С обработкой, передачей и хранением моих персональных данных, необходимых для получения патента, согласен.

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| (подпись заявителя) |  | | | | | | | | | | | (дата) | |
| Дата приема документов: |  |  |  |  |  |  |  |  |  |  | регистр. №: | |  |

(число) (месяц) (год)

Документы принял:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(должность, фамилия, имя, отчество должностного лица, принявшего документы) (подпись)

Решение об оформлении патента принял:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |