



**National Directorate-General for
Aliens Policing
Országos Idegenrendészeti
Főigazgatóság**



Application form for the substitution of a registration certificate / a residence card / a permanent residence card for EEA nationals / a permanent residence card for third-country national family members document

For completion by the authority.

The authority receiving the application (code and name):

The date of receipt of the application:

_____ year ____ month ____ day

Facial photograph

[Handwritten signature specimen of the applicant (or legal representative)]

The signature must be inside the box in its entirety.

PLEASE COMPLETE THE FORM LEGIBLY, IN LATIN BLOCK LETTERS.

Legal basis of the application:

- ☐ substitution of a registration certificate document
- ☐ substitution of a residence card
- ☐ substitution of a permanent residence card for EEA nationals
- ☐ substitution of a permanent residence card for third-country national family members

Delivery of the document:

- ☐ The applicant requests delivery of the document **by way of post.**
- ☐ The applicant will collect the document at the **issuing authority.**

Telephone number:

Email address:

| | | | | | |
|--|---|-----------|-----------|--------|---------------------------|
| Personal data of the applicant | | | | | |
| 1. Surname: | | | | | |
| 2. Forename(s): | | | | | |
| 3. Place and date of birth: _____, _____ year _____ month _____ day | | | | | |
| 4. Marital status: <input type="checkbox"/> unmarried <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widow(er) | | | | | |
| 5. Document number and date of expiry of the applicant's passport/personal identification document issued by a foreign national authority: _____, _____ year _____ month _____ day | | | | | |
| 6. Document number and date of expiry of the applicant's residence permit document to be substituted: _____, _____ year _____ month _____ day | | | | | |
| 7. Place of residence in Hungary: | | | | | |
| Postal code: | parcel identification/land register reference number (topographical LOT no.): | | Locality: | | Name of the public place: |
| Type of the public place (i.e. street, road, square, etc.): | Street number: | Building: | Stairway: | floor: | door: |
| 8. I hereby report that my residence permit document is <input type="checkbox"/> lost. <input type="checkbox"/> stolen. <input type="checkbox"/> destroyed. <input type="checkbox"/> damaged. | | | | | |
| 9. Are you a holder of a residence permit or a permanent residence permit in another Member State of the European Union? <input type="checkbox"/> yes <input type="checkbox"/> no If the answer is yes, name of the Member State: type of the document: number and validity of the document: _____, _____ year _____ month _____ day | | | | | |
| Detailed description of the circumstances: Date: <div style="text-align: right;">..... (signature of the applicant)</div> Transaction number of payment if made by an electronic payment instrument or by a bank deposit: | | | | | |
| <p style="text-align: center;">INFORMATION NOTICE</p> <p>The following must be attached to/enclosed with the application :</p> <ul style="list-style-type: none"> 1 facial photograph, the damaged residence permit document, any other document (e.g. minutes of a police report, an official certificate, etc.). <p>The procedure is subject to the payment of an administrative service fee at the rate laid down in the specific legislation.</p> <p>If the document that is assumed and reported to be lost is found before the issuance of the new substitute document, the competent regional directorate will return it to its rightful holder. If the client finds the document that is assumed and reported to be lost after receiving his/her new substitute document, (s)he is required to return it to the competent regional directorate.</p> | | | | | |

For completion by the authority.

I approve the substitution of the document.

Date:..... Stamp
(signature)

I revoked the damaged residence permit document no., and received the submitted permit.

Date: Stamp
(signature of the case worker)

I handed over the residence permit document no.

Date:
.....
(signature of the applicant) (signature, stamp of the case worker)