



REGISTRATION AT THE CONSULAR REGISTRY OFFICE

OF THE EMBASSY OF ITALY IN SINGAPORE

Self Declaration Affidavit (Art. 46 D.P.R. n.445 dated 28/12/2000)

The undersigned

SURNAME : \_\_\_\_\_ NAME : \_\_\_\_\_

PLACE OF BIRTH : \_\_\_\_\_ DATE OF BIRTH : \_\_\_\_\_

GENDER :  M  F

FATHER'S NAME : \_\_\_\_\_ MOTHER'S FULL NAME : \_\_\_\_\_

aware of the penal sanctions, in case of making false statements and/or submitting false documents, pursuant to Law n.470/88 and referred to by art.76 of D.P.R. 445 dated 28/12/2000

DECLARES

to be an Italian citizen residing in Singapore at the following address: \_\_\_\_\_

\_\_\_\_\_ Postal Code : \_\_\_\_\_

Email : \_\_\_\_\_ Phone : +65 \_\_\_\_\_

MARITAL STATUS:

Single  Separated  Widowed  Divorced  Partner

Married - Date and place of Marriage : \_\_\_\_\_

- Marriage registration Municipality : \_\_\_\_\_

STUDY QUALIFICATION :

None  Primary School  Middle School  High School  University Degree

PROFESSION : \_\_\_\_\_ EMPLOYER : \_\_\_\_\_

OTHER CITIZENSHIP : \_\_\_\_\_ YEAR OF FIRST EMIGRATION : \_\_\_\_\_

ARRIVAL DATE TO SINGAPORE : \_\_\_\_\_

COMING FROM :

ANOTHER CITY ABROAD : \_\_\_\_\_  ITALIAN MUNICIPALITY : \_\_\_\_\_

MUNICIPALITY OF LAST RESIDENCE IN ITALY (or the parents' Municipality of origin for the children born

abroad) / AIRE REGISTRATION MUNICIPALITY : \_\_\_\_\_ PROVINCE :

REGISTERED IN THE ELECTORAL LISTS OF THE MUNICIPALITY OF : \_\_\_\_\_

PASSPORT N. : \_\_\_\_\_ PLACE OF ISSUE : \_\_\_\_\_ DATE OF ISSUE : \_\_\_\_\_

ID. CARD N. : \_\_\_\_\_ PLACE OF ISSUE : \_\_\_\_\_ DATE OF ISSUE : \_\_\_\_\_

Please, attach a copy of your valid passport and of the stay permit for each family member and a copy of the tenancy agreement indicating the residence address, as well as any other document required and /or useful for the registration at the Consular Registry Office.

**FAMILY MEMBERS LIVING IN THE SAME RESIDENCE:**

**SPOUSE/PARTNER :** \_\_\_\_\_  
NAME SURNAME PLACE OF BIRTH DATE OF BIRTH

**NATIONALITY OF THE SPOUSE/PARTNER :** \_\_\_\_\_

**MUNICIPALITY OF LAST RESIDENCE :** \_\_\_\_\_

**CHILDREN :** \_\_\_\_\_  
NAME SURNAME PLACE OF BIRTH DATE OF BIRTH

\_\_\_\_\_  
NAME SURNAME PLACE OF BIRTH DATE OF BIRTH

\_\_\_\_\_  
NAME SURNAME PLACE OF BIRTH DATE OF BIRTH

**FAMILY MEMBERS NOT LIVING IN SINGAPORE:**

**1.** \_\_\_\_\_  
NAME SURNAME

\_\_\_\_\_  
NAME AS SINGLE PLACE OF BIRTH DATE OF BIRTH

ADDRESS : \_\_\_\_\_ POSTAL CODE : \_\_\_\_\_

CITY : \_\_\_\_\_ PHONE N. \_\_\_\_\_

**2.** \_\_\_\_\_  
NAME SURNAME

\_\_\_\_\_  
NAME AS SINGLE PLACE OF BIRTH DATE OF BIRTH

ADDRESS : \_\_\_\_\_ POSTAL CODE : \_\_\_\_\_

CITY : \_\_\_\_\_ PHONE N. \_\_\_\_\_

**3.** \_\_\_\_\_  
NAME SURNAME

\_\_\_\_\_  
NAME AS SINGLE PLACE OF BIRTH DATE OF BIRTH

ADDRESS : \_\_\_\_\_ POSTAL CODE : \_\_\_\_\_

CITY : \_\_\_\_\_ PHONE N. \_\_\_\_\_

DECLARES to be aware of the duty to inform the Embassy, within 90 days, of any changes related to his/ her own family unit in conformity with what is prescribed by Law n.470 dated 27/10/1988.

DECLARES also have read the information on the protection of personal data concerning the Consular Service, pursuant to the General Data Protection Regulation (EU) 2016/679.

**DATE**

**THE UNDERSIGNED**

Singapore on \_\_\_\_\_

\_\_\_\_\_  
full signature

This declaration does not require the authentication of the signature and it fully substitutes the ordinary certification required by or addressed to a public administration body as well as to providers of public services and private recipients who agree to it. This information is in accordance with art.10 of Law 675 of 1996.