



Ambasciata d'Italia  
Singapore

## REGISTRATION AT THE CONSULAR REGISTRY OFFICE

### OF THE EMBASSY OF ITALY IN SINGAPORE

Statement in lieu of a Certificate (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 : \_\_\_\_\_

DATE OF TRANSFER OF RESIDENCE TO THE CONSULAR DISTRICT OF 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 to 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.