# APPLICATION
# FOR REVOCATION OF REGISTRATION CERTIFICATE FROM THE CUSTOMER

Business Identification Number: _____

For non-residents - VAT registration number with an indication of the country of registration:

_____

Name of organization: _____

_____

Identification data of the employee of the organization in whose name the revocable registration certificate is issued:

Individual Identification Number: _____

For non-residents - number of the identification document, date of issue, name of the issuing authority with an indication of the state of issue or a unique number: _____

_____

Last name: _____

First                                                                                                                          name:

_____

Patronymic:

_____

Email address: _____

Telephone:

_____

Hereby _____ *(Customer's name)*, registered

address: _____, registration

certificate No. _____ _____dated "___" _____ ____,

issued by _____

*(date of issue, issuing authority)*

represented by _____ *(position, last name, initials)*,

acting on the basis of _____, in

connection                                                                                                                          with

_____

_____,

*(reason for revocation of the registration certificate: compromise of the private key,*

*change of information, replacement of the key)*

requests to revoke the registration certificate with a serial number

_____
_____
_____

Position of the Customer's head                    _____

Last name, first name, patronymic                 _____

Signature                                                        _____

Date          "___"_____20___          Place of seal

**"Customer"**

_____/            /

**Place of seal**