

To the Information Centre of the Ministry of the Interior of the Republic of Latvia

.....
(given name(s))

.....
(surname)

.....
(all former names, surnames and personal identity numbers)

□□□□□□ - □□□□□□

(personal identity number)

□□ □□ □□□□

(date of birth)

.....
(address of permanent or temporary residence)

Phone

E-mail

REQUEST FOR INFORMATION

According to the Punishment Register Law I request the certificate from the Actual Database of the Punishment Register in regarding my:

(Latvian, Russian, English)

Content of the certificate and its preparation time	<input type="checkbox"/> criminal record in the territory of the Republic of Latvia; <input type="checkbox"/> administrative violations in the territory of the Republic of Latvia. The certificate should be prepared: <input type="checkbox"/> within 5 working days <input type="checkbox"/> urgently (certificate will be ready on the following business day)
Additional information to be included in the certificate	<input type="checkbox"/> include information from the Archive Database of the Register <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"><p>! When information is requested from the Archive Database of the Punishment Register, the certificate will include information about a deleted criminal record and also information about a penalty applied to a natural person in the case of administrative violation if more than one year has passed since serving the sentence</p></div> <input type="checkbox"/> include information for time period from to <input type="checkbox"/> preferable spelling of my name and surname (specify only if the certificate will be prepared in language other than Latvian):
Certificate receiving options	I would like to receive the certificate (please choose from one of the options below): <input type="checkbox"/> in person (at the Representation) <input type="checkbox"/> as registered letter Please send the certificate to: (please indicate the postal address)

Attached: - copy of personal identification document
- payment order

_____/_____/_____
(date) (month) (year)

(signature)

(name, surname)