NIE Number Check List

Details Of Person Making Application For NIE Number

Full Name:		•••••	•••••
Maiden Name (if applicable):			
Spanish Address:			
Phone Number:Mobile Number:			
Email Address:			
Passport Nº:Expiry Date:			
Date Of Birth:Place Of Birth:			
Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Wido	wed		
Fathers Name:	Deceased:	☐ Yes	□ No
Mothers Name:	Deceased:	☐ Yes	□ No

Cost: including appointment, photograph, photocopies, taxes, paperwork and trip to Elche and back 75€

The information that you supply via this form will be entered into a filing system and will only be accessed by authorised persons of SEGESP or its agents. The information will be retained by SEGESP and will only be used for the purpose of (a) processing the service requested, and (b) summary information for statistical and audit purposes. By supplying such information you consent to SEGESP storing the information for the stated purposes. The information will not be shared with any person or company outside of SEGESP unless needed for the provision of the service requested. The information is held by SEGESP in accordance with the provisions of the Data Protection Act 1998.

