



# EXPAT SOLUTIONS

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## Resident Certificate Check List

- Proof of Income – 3 months income with a supporting statement or bank certificate       Proof of Medical Cover - via S1 form, contract, self employment, private cover or convenio especial

### Details Of Person Making Application For Residencia

Full Name: .....

Maiden Name (if applicable): .....

Address in Spain:.....

.....

Phone Number:..... Mobile Number:.....

Email Address:.....

Passport N°:..... Expiry Date:.....

Nationality:..... NIE Number:.....

Date Of Birth:..... Place Of Birth:.....

Marital Status:     Single     Married     Divorced     Widowed

Fathers Name:..... Deceased:     Yes     No

Mothers Name:..... Deceased:     Yes     No

**Cost:** including appointment, photocopies, taxes, paperwork, 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.

