## **RESIDENT'S NIE APPLICATION FORM**



PASSPORT NO.				
URNAME				
SECOND SURNAME				
NAME				
Date of birth				
Place of birth				
Country of birth				
Nationality				
Marital status (mark x)	S M W D			
Father's name				
Mother's name				
1. DOMICILE IN SPAIN				
Address				
N° FI	Door Portal			
Town	PC Prov			
Telephone	Email			
2. ADDRESS FOR NOTIFICATIONS				
The same as the previous on	e YES NO			
Address	N° Floor			
Town	PC Prov			
ADDRESS FOR AEAT NOTI	FICATIONS			
Address 1 Address	2			
If it is another, indicate:				
Address	N° Floor			
Town	PC Prov			
Country				

SITUATION IN SPAIN		
Planned period of residence in Spain		
Start date of residence in Spain		
No. of relatives accompanying or meeting the applicant in Spain		
TEMPORARY RESIDENCE (Mark x)		
Employee		
Self-employed person		
Not active with sufficient resources and health insurance		
Student with sufficient resources and health insurance EU / EEA / Switzerland national, relative of another national included in the previous sections		
DNI/NIE/PAS of the EU/EEA/Switzerland citizen Link with the EU / EEA / Switzerland citizen who gives the right		
Link with the EO / EEA / Switzenand citizen who gives the right		
PERMANENT RESIDENCE (Mark x)		
Continuous residence in Spain for 5 years		
Worker of retirement age and right to pension with activity in Spain for 12 months and residence of 3 years		
Worker of retirement age and right to pension with activity in Spain for 12 months and Spanish spouse / partner		
Worker of retirement age and right to pension with activity in Spain for 12 months and whose spouse / partner lost Spanish nationality due to their marriage / registration		
Early retirement worker with activity in Spain for 12 months and 3-year residency		
Early retirement worker with activity in Spain for 12 months and whose spouse / partner is Spanish		
Early retirement worker with activity in Spain for 12 months and whose spouse / partner lost Spanish nationality due to their marriage / registration		
Worker in permanent disability having resided in Spain for more than continuous years		
Worker in permanent disability consequence of work accident or professional illness		
Worker in permanent disability with Spanish spouse / partner		
Worker in permanent disability and whose spouse / partner lost Spanish nationality due to their marriage / registration		
Worker who, after 3 consecutive years of activity and residence in Spain, carries out his activity in another MS, maintaining residence in Spain		
Others		
CAIXABANK MANAGER CONTACT DETAILS		

Name	
Telephone	Email
Office	Signature
conservation of per ABOGADOS Y ASOC You have recognized	CLAUSE: In compliance with the Spanish Organic Law and the European Data Protection Regulation, we inform you that the person responsible for the treatment and sonal data that is transferred for the sole purpose of managing contractual or pre-contractual relationships with suppliers or clients of this company, is DURÁ GREGORI IADOS, SCP, with professional address at Calle Filarmónica nº1-1ºa, 03590-Altea (Alicante). Your data will be kept, and will not be transferred, except legal obligation. d rights of access, rectification, deletion, limitation and portability of your personal data, with the legal and regulatory limitations established, which you can exercise ddressed to the above address, and the right to make claims before the AGPD: www.agpd.is.