

REPUBLIC OF SLOVENIA

## MINISTRY OF HEALTH

HEALTH INSPECTORATE OF THE REPUBLIC OF SLOVENIA

Inspection Support and Quality Division

# Registration of a new user to access the

# ‘SUBMISSION OF APPLICATIONS FOR OFFICIAL CONTROL OF SHIPMENTS FROM THIRD COUNTRIES’ online application

|  |
| --- |
| ***Information on the organisation (declarant)*** |
| Name of organisation: |
| Address of organisation: |
| Post office and location of organisation: |
| Tax ID number of organisation: |
| ***Responsible person of the declarant*** |
| First name: |
| Surname: |
| Email address: |
| Telephone: |

|  |
| --- |
| ***Information on the new user*** |
| First name: |
| Surname: |
| Email address: |
| Telephone: |
|  |
| First name: |
| Surname: |
| Email address: |
| Telephone: |

## Data entry date:

Signature of the declarant’s responsible person: (or digital signature)

STAMP

[www.zi.gov.si,](http://www.zi.gov.si/) email: [gp.zirs@gov.si](mailto:gp.zirs@gov.si)

Vožarski pot 12, Ljubljana, tel.: 01 28 03 802, Fax: 01 28 03 808

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