Exmº. Senhor: **PRESIDENTE DA CÂMARA MUNICIPAL DE MOIMENTA DA BEIRA**

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| **ASSUNTO:** ***INUMAÇÃO/AUTORIZAÇÃO DE ENTRADA EM JAZIGO EM PERPÉTUO***   |  | | --- | | **DADOS DO REQUERENTE** | | NOME: | | MORADA: | | COD. POSTAL:      -           FREGUESIA: | | TELEFONE:       FAX:       E-MAIL: | | Cartão de Cidadão N.º :       VALIDADE:    /    / 20 | | Nº DE CONTRIBUINTE: |  |  |  |  | | --- | --- | --- | | Vem requerer a V. Ex.ª, na qualidade de |  | 1 e nos termos do art. | | 3.º e 4.º do Decreto-Lei n.º 411/98 de 30 de Dezembro, a devida autorização para a : | | |   **Inumação em :**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | NOME |  | | | | | | | | | | | | | | | MORADA | |  | | | | | | | | | | | | | | COD. POSTAL | | | | - | |  |  | | | | FREGUESIA |  | | | | Declaro que autorizo a entrada do cadáver / ossada de | | | | | | | | |  | | | | | | | na sepultura perpétua n.º | | | | |  | | | , talhão n.º |  | , sito no Cemitério Municipal. | | | | | | O Declarante | | |  | | | | | | | | | | Data | /    / |   **Autorização de entrada em Jazigo Perpétuo:**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Sepultura temporária n.º | | |  | , talhão nº. |  | , | | Sepultura perpétua n.º | | |  | , talhão nº. |  | , | | Jazigo n.º | | - | | | de |  | | | | | | | .2 |   Pede deferimento, |

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| Moimenta da Beira, |  | de |  | de | 20 |

Assinatura do(a) Requerente,

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**Documentos a apresentar:** Cartão de Cidadão do requerente ; Certidão de Óbito.

1 Qualquer das situações previstas no art. 3.º (testamenteiros, cônjuge sobrevivo, pessoa que residia com o falecido em condições análogas às dos cônjuges, herdeiro, familiar ou qualquer outra situação).

2 Indicar nome.

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| **A PREENCHER PELOS SERVIÇOS** | | |
| Pagou       €, Guia de pagamento N.º      , em    /    / 20   . O funcionário: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. | | |
| **REGISTO DE ENTRADA** | **INFORMAÇÃO DOS SERVIÇOS** | **DESPACHO** |
| |  |  |  |  | | --- | --- | --- | --- | | Registo Nº. | |  | | |  | |  | | | Proc.º Nº. | |  | | |  | |  | | | O Funcionário: | |  | | | Em | /    / 20 | | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  | | | | | |  |  | | | | | |  | | |  | | | | O Funcionário: | | | |  | | | Em | | /    / 20 | | | | |  |  |  | | --- | --- | --- | | DEFIRO | | | | Em | /    / 20 | |