

## NATIONAL TAX AND CUSTOMS ADMINISTRATION

## **APPLICATION**

## for issuing a tax account excerpt

| Name of the person filing the application:   |  |
|--|--|
| Address of residency:  |  |
| Tax identification number/tax number:  |  |
| Phone number:  |  |
| Years for which the tax account excerpt is requested   | d:                                     |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Postal details*:   |  |
| Name:  |  |
| Address:   |  |
| *Please give the details where the tax account excerpt   | shall be sent.                         |
| According to the Annex of the Act XCIII of 1990 on a copies shall be paid for each page. If the amount of the duty shall not be paid based ont he Annex of the Act C | e duty is less than 1000 HUF, than the |
| Dated in on  |  |
|  |  |
|  | Signature                              |

Taxation stamp to be attached here: