**1 DATOS PERSONALES IDENTIFICATIVOS (A cumplimentar por el interesado)**

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| Apellido y nombre o Razón Social: | | | | | | |  | | | | | | | | | | | | |
| DNI, NIF, NIE: | | | |  | | | | | | | | | | | | | | | |
| Domicilio: | |  | | | | | | Nº | |  | Portal | |  | Planta | | |  | Puerta |  |
| C.P.: |  | | Municipio: | | |  | | | | | | Provincia: | | | |  | | | | |
| Teléfono(s): | | |  | | | | | | Fax: | |  | | | | | | | | |
| Correo electrónico: | | | | |  | | | | | | | | | |  | | | | |

**2 REPRESENTANTE**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Apellido y nombre o Razón Social: | | | | | | |  | | | | | | | | | | | | |
| DNI, NIF, NIE: | | | |  | | | | | | | | | | | | | | | |
| Domicilio: | |  | | | | | | Nº | |  | Portal | |  | Planta | | |  | Puerta |  |
| C.P.: |  | | Municipio: | | |  | | | | | | Provincia: | | | |  | | | | |
| Teléfono(s): | | |  | | | | | | Fax: | |  | | | | | | | | |
| Correo electrónico: | | | | |  | | | | | | | | | |  | | | | |

**AUTORIZA:** Al señor Tesorero del Ayuntamiento de Serrejón (Cáceres) para que las cantidades que deba percibir con cargo a los fondos de dicha Administración, sean ingresadas en la entidad financiera reseñada.

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| **DATOS DE LA ENTIDAD FINANCIERA (A cumplimentar por la Entidad Financiera)** |
| **CÓDIGO IBAN:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **CÓDIGO BIC:**   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |   **Nombre de la Entidad:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Sucursal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Domicilio de la Entidad:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Población:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_C.P.\_\_\_\_\_\_\_ Provincia:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

Asimismo, **DECLARO** que la persona que figura como interesado es el titular de la cuenta anteriormente señalada.

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| Firma del declarante |