**DANE OSOBY UPOWAŻNIONEJ DO KONTAKTÓW WS. WNIOSKU O WYDANIE TYMCZASOWEGO POZWOLENIA NA UŻYTKOWANIE „ION” DLA MODUŁU WYTWARZANIA ENERGII TYPU D**

1. **Osoba upoważniona do kontaktów w sprawie przedmiotowego wniosku (zakres umocowania zawiera pełnomocnictwo – załącznik nr 13 do WNIOSKU)**
	1. Imię

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* 1. Nazwisko

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* 1. Pełna nazwa firmy, w której zatrudniona jest osoba upoważniona do kontaktów
	(Nazwę firmy i dane adresowe wypełniać tylko gdy są inne niż podane w pkt. 1 WNIOSKU. Bezpośrednie dane kontaktowe do osoby upoważnionej wypełnić każdorazowo)

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* 1. Siedziba i adres
		1. Miejscowość

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* + 1. Ulica Nr

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* + 1. Poczta Kod pocztowy

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* 1. Nr Telefonu

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* 1. E-mail

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