



**DATA SHEET 16T34**

FOR ISSUING TAX IDENTIFICATION CODE, CUSTOMS IDENTIFICATION NUMBER TO PRIVATE INDIVIDUALS, FOR SETTLING DATA DISCREPANCIES AND REPORTING POSTAL ADDRESS

Place of barcode

This Data Sheet must be filed in two hard copies or one electronic copy.

**TO BE FILLED OUT BY THE AUTHORITY**

Use of name code:  Nationality code:   
Receipt/arrival:  Code of receiving person:   
Date of mailing:  VPID (EORI) number **HU**

Remark: \_\_\_\_\_

**TO BE FILLED OUT BY THE TAXPAYER**

1. Registration number of the Data Sheet to be corrected, based on the Notice of the National Tax and Customs Administration: \_\_\_\_\_ It must be filled out in the cases described in the Instructions.

2. Do you have a tax identification code? No  , Yes  if yes, please indicate the number: \_\_\_\_\_  
Do you have an EOR/VPID number issued in Hungary? No  , Yes  if yes, please indicate the number: HU \_\_\_\_\_  
Do you have an EORI number issued in another Member State? No  , Yes  if yes, please indicate the number: \_\_\_\_\_  
It is necessary to fill this out if a foreign person has already got a community customs identification number issued in his or her own Member State (an EORI number pursuant to the point 18 of the Article 1 of the Delegated Regulation (EU) 2015/2446 (28 July 2015) supplementing Regulation (EU) No 952/2013 of the European Parliament and of the Council as regards detailed rules concerning certain provisions of the Union Customs Code)

**Reason of filling out the Data Sheet:**  \*\* In cases indicated by codes 3-6, an administration service fee of HUF 3,000 shall be paid.  
issue of card for the first time (1), issue of card with amended data\* (2), card was lost (3\*\*), card was damaged (4\*\*), card was destroyed (5\*\*), card was stolen (6), card was not received following ex officio (or mass) production (7), card was received in a damaged condition (8), card was not received following non-serial production (9), issue of tax card for a child having a tax identification code for the first time (28), reporting postal address (31), request of tax identification code by paying agent (27), request of tax identification code by municipal tax authority (29), request of tax identification code by public employment agency (30), Customs Identification Number (EORI) (43), Customs Identification Number (EORI) (44), Customs Identification Number (EORI) (45)

**DATA OF THE PRIVATE INDIVIDUAL**

Nationality:

Surname:

Forename(s):

Surname at birth:

Forename(s) at birth:

Former married surname:

Place of birth:  town/township

Date of birth:

3.  Mother's surname at birth:

Mother's forename(s) at birth:

Place of abode:  Postal code  town/township

name of public place

type of public place (street, road, square, etc.)

number/topographical lot number  number of building  stair-case  floor  door

Foreign citizen's place of abode in a foreign country:  Postal code  country

town/township

name of public place

type of public place (street, road, square, etc.)

number/topographical lot number  number of building  stair-case  floor  door

Postal address for tax card if different from the abode address or correspondence address:  Name of company/institution

Postal code  country

town/township

name of public place

type of public place (street, road, square, etc.)

number/topographical lot number  number of building  stair-case  floor  door

\*(Please mark the data you may possibly dispute by writing an 'X' in the code-box in front of the line!)

**ONLY THE HUNGARIAN FORM CAN BE OFFICIALLY FILLED!**

### DATA SHEET 16T34

FOR ISSUING TAX IDENTIFICATION CODE; CUSTOMS IDENTIFICATION NUMBER TO PRIVATE INDIVIDUALS, FOR SETTLING DATA DISCREPANCIES AND REPORTING POSTAL ADDRESS

To be filled out by the applicant for the tax identification code, if it is a paying agent, a municipal tax authority or a public employment agency requesting the issue of a tax identification code for a private individual

Name of applicant: \_\_\_\_\_

Tax number of applicant: \_\_\_\_\_-\_\_\_\_-\_\_\_\_\_

4. Address of applicant: \_\_\_\_\_ Postal code \_\_\_\_\_ town/township \_\_\_\_\_  
 \_\_\_\_\_ name of public place \_\_\_\_\_  
 \_\_\_\_\_ type of public place (street, road, square, etc.) \_\_\_\_\_  
 \_\_\_\_\_ number/topographical lot number \_\_\_\_\_ number of building \_\_\_\_\_ stair-case \_\_\_\_\_ floor \_\_\_\_\_ door \_\_\_\_\_

Reporting postal address of private individual

Tax number: \_\_\_\_\_-\_\_\_\_-\_\_\_\_\_

5. \_\_\_\_\_ Postal code \_\_\_\_\_ country \_\_\_\_\_  
 U/T  \_\_\_\_\_ town/township \_\_\_\_\_  
 \_\_\_\_\_ name of public place \_\_\_\_\_  
 \_\_\_\_\_ type of public place (street, road, square, etc.) \_\_\_\_\_  
 \_\_\_\_\_ number/topographical lot number \_\_\_\_\_ number of building \_\_\_\_\_ stair-case \_\_\_\_\_ floor \_\_\_\_\_ door \_\_\_\_\_

By reporting my postal address I give my consent to the state tax authority to utilize and handle this information to perform and execute its tasks specified by law.

To be filled out if requesting a VPID or if you already have a VPID

Contact information:

- e-mail address: \_\_\_\_\_  
 - telephone number: \_\_\_\_\_  
 - telefax number: \_\_\_\_\_

Data to be filled out by a non-Hungarian national (private individual):

Nationality: U/T  \_\_\_\_\_  \_\_\_\_\_ U/T  \_\_\_\_\_  \_\_\_\_\_ U/T  \_\_\_\_\_  \_\_\_\_\_

Type of Document (1, 2, 3)	Number of Document	Date of Issue	Expiry Date	Country Code of Issuing Authority

Data to be filled out in the case of both Hungarian and foreign private individuals:

I hereby give my consent to making my EORI number, name and address publicly available.   
 I retract my consent to the public availability of my EORI number, name and address.   
 Please show my data in the website of the Taxation and Customs Union Directorate General of the European Commission   
 Please remove my data from the website of the Taxation and Customs Union Directorate General of the European Commission

7. I request a certificate of the tax identification code

**Being aware of my legal liability I declare that the data I provided do reflect the truth**

\_\_\_\_\_ locality \_\_\_\_\_ year month day \_\_\_\_\_

name of taxpayer or representative (proxy)  
 name of parent (legal guardian) or proxy  
 name of applicant in capital letters

Please mark with an 'X' if you are a proxy and your Power of Attorney is attached

signature of taxpayer or representative (proxy)  
 signature of parent (legal guardian) or proxy  
 signature of applicant

Please mark with an 'X' if you are a permanent proxy duly registered with the national tax authority and entitled to sign this Form!

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