|  |  |
| --- | --- |
| NIF. | APELLIDOS Y NOMBRE O RAZON SOCIAL |
| DOMICILIO: CALLE, PLAZA, AVD. |
| LOCALIDAD/MUNICIPIO | PROVINCIA | CODIGO POSTAL |
| TELEFONO | MOVIL | FAX | E-MAIL |

**DECLARO**

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Alía a \_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_

Fdo. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_