

IF YOU ALREADY HAVE AN OIB, PLEASE JUST SEND US YOUR OIB INFORMATION.

APPLICATION FOR THE DETERMINATION AND ASSIGNMENT OF THE PERSONAL IDENTIFICATION NUMBER (OIB)

1. NATURAL PERSON

MASTER _____
CITIZEN NUMBER (MBG)

1.1. General data			
Name		Surname	
Sex		Maiden surname	
Date of birth		Place of birth	
State of birth		Citizenship	
Residential address	It is necessary to state your address that you have on your ID or passport. NOT the temporary address in Croatia!		

1.2. Identification document data					
ID card number		Valid until			
Passport number		Valid until		Country of issue	
European ID card no.		Valid until		Country of issue	
ID document of the state of citizenship		Valid until		Country of issue	

You must fill out the requested information based on your official identification document (ID or passport) you will enclose to this application form.

1.3. Parent's data		
	Father	Mother
OIB (PIN)		
MBG (Master citizen number)		
Name		
Surname		
Maiden surname		

Fill in only the following categories:
 - name
 - surname
 - maiden surname

2. LEGAL ENTITY

Registration number (MB) _____

2.1. General data	
Name	
Short name	
Translation	
Type of legal entity	
Legal form	
Registered office address	
Place and state of establishment	
Registration date	

You do not need to fill out this entire LEGAL ENTITY SECTION.

3. List of documents attached	

List your identification document that you used to fill out this application form and that you are sending us in the email.

Date of certificate submission

DO NOT FORGET TO SIGN THE FORM AND PUT THE SIGNATURE DATE ON THE FORM BECAUSE WITHOUT IT THE FORM IS NOT VALID!

Applicant's signature

Official's signature

INSTRUCTIONS FOR FILLING OUT THE APPLICATION FORM

1. This form is submitted for the determination and assignment of the personal identification number.
2. The form shall be submitted to the competent local Tax Administration office. The competent local Tax Administration office is the office of the Tax Administration competent according to the residential address of the Croatian citizen or according to the registered office address of the legal entity in the Republic of Croatia. The competent local Tax Administration office for foreign persons or Croatian citizens not residing in the Republic of Croatia, shall be the Tax Administration office competent according to the location where the reasons for monitoring first arose. If local competence cannot be established, the form shall be submitted to the Tax Administration – Branch office in Zagreb.
3. The form shall be submitted by the applicant or their legal representative, who is requesting the determination and assignment of the personal identification number, and shall be personally signed (the Applicant's signature).
4. Natural persons - Croatian citizens and foreign natural persons fill out items 1 and 3 of the form, whereas legal entities with registered office on and outside the territory of the Republic of Croatia fill out items 2 and 3 of the form.
5. Under item **1. Natural person**, please enter the Master Citizen Number (MBG).
6. Under item **1.1. General data**, please enter the following: name, surname, sex (male/female), maiden surname, date of birth (day, month, year), place of birth, state of birth, citizenship, residential address (state, city/municipality, town, street and number).
7. Under item **1.2. Identification document data**, please enter:
 - for Croatian citizens: ID card number, valid until
 - for foreign natural persons: passport number, valid until, and country of issue; if the person holds no passport, they shall enter their European Identity Card number, valid until and country of issue or the number of the identification document issued by their state of citizenship, valid until, country of issue and proof of citizenship
8. Under item **1.3. Parent's data**, please enter: OIB (PIN), MBG (Master Citizen Number), name and surname, maiden surname.
9. Information under items 5. - 8. are entered providing that such information is available for the applicant.
10. Under item **2. Legal entity**, please enter the registration number (MB).
11. Under item **2.1. General data**, please enter: legal entity name and short name, translation, type of legal entity, legal form – if applicable (company - limited liability company, joint stock company, limited partnership, general partnership), registered office address (state, city/municipality, town, street and number), place and state of establishment, registration date.
12. Under item **3. List of documents attached**, please list all copies of the documents which are attached to the form.
13. The official shall fill in the date on which the Certificate was submitted and sign the form.