

MINISTRY OF DEFENCE
DEPARTMENT TO HONOR THE FALLEN SOLDIERS
HISTORICAL STATISTICAL DIRECTION

Email: ricerca.caduto@onorcaduti.difesa.it – Email certified: onorcaduti@postacert.difesa.it

SELF-CERTIFICATION
(ART. 47 - DPR 28/12/2000, N. 445)

The undersigned _____ as of _____ Date of birth: __/__/____
in _____ Country _____ lives in: _____
country _____ street: _____ ID _____ n _____
issued by _____ on: __/__/____ expiration: __/__/____
home ph. _____ cell .: _____ email: _____

REQUEST

Information about the following Fallen/Missing Soldier on the¹
 1° W.W. 2° W.W. Peacekeeping mission other _____

Surname: _____ Name: _____ Military/Civil, Rank _____
Paternity: _____ Maternity: _____ Date of birth: __/__/____
City of birth: _____ City _____ Country _____ for the following
reason: _____

(aware that the release of false declarations is punished by law (art.76 Presidential Decree n. 445/2000))

DECLARE

–to be the² _____ of the Fallen/Missing in war and/or Peacekeeping mission;

–to be delegated by Mr. / Mrs

Surname: _____ Name: _____ relationship _____
Date of birth: __/__/____ in _____ City _____ Country _____
lives in: _____ City _____ Country _____ street: _____
ID _____ n _____ issued by _____ on: __/__/____
expiration: __/__/____ home ph. _____ cell ph.: _____ email: _____

Attached **copy of the valid identity document** (in PDF) of the applicant and the delegating party (if necessary).

Date _____ Signature of the applicant _____
(in full and legible)
Signature of the delegator _____
(in full and legible)

Authorize the Administration of Defense, in accordance with EU Regulation n.2016/679, to hold my personal data provided in this application, which will be used only for the purposes of the administrative procedure relating to this request and will not be disclosed to third parties.

Signature of the applicant/ delegate _____
(in full and legible)

Signature of the delegator _____
(in full and legible)

IF THE REQUEST IS NOT FILLED AND SIGNED IN ANY PART, WITH ANNEX THE REQUIRED VALID DOCUMENT THE REQUEST WILL BE FILED.

¹Check the box if aware

² Indicate the degree of relationship