



SWORN DECLARATION
(article 8 Law 1599/1986)

(EXAMPLE)

The accuracy of the information supplied in this statement may be cross checked with the files of any other service (article 8 par. 4, L. 1599/1986)

TO ⁽¹⁾ :	HELLENIC TELECOMMUNICATIONS & POST COMMISSION				
Name	MARK	Last Name:	ALEXANDROPOULOS		
Name and Surname of Father	BILL ALEXANDROPOULOS				
Name and Surname of Mother	ALICIA ALEXANDROPOULOU				
Date of birth ⁽²⁾ :	15/01/1968				
Place of Birth:	ATHENS				
Identity Card Number / Passport Number/Number of other relative document (for foreigners):	J 105060	Tel:	210 1234567		
Place of Residence:	ATHENS	Street:	ALEXANDRAS A.	Nr.:	11
				Post cod e:	114 73
Fascicle Number (Fax):		E-mail Address: (Email):			

Under my own responsibility and in full knowledge of the penalties ⁽³⁾ foreseen by the provisions of par. 6, article 22, L.1599/1986, I hereby state that the above details of my identity are accurate, the details I declare are true, and that I am the subscriber to the telephone connection with call number **372 - 5...9123456**..... & SIM card number: **8937...123456789101215F...** which I hereby submit to the company under the trade name PLANETISM/G.PETROULAKIS TELECOMMUNICATIONS SOCIETE ANONYME. In addition, I hereby state that my Tax Registration Number is**012345678**.....

(THE FOLLOWING ARE TO BE COMPLETED ONLY IF THE USER IS NOT THE SUBSCRIBER/HOLDER OF THE CONNECTION)

The details of the user of the aforementioned connection are as follows:

(For users/natural persons) full name, name of father, place of birth, date of birth, Identity Card Number/Passport Number/Number of other relevant document (for foreign citizens) and Tax Registration Number

(For company users/legal entities)

Trade name,
Address of registered office....., Tax Registration Nr.:
Full name of Legal Representative
Full name of father of the Legal Representative

RECEIVED BY:
(To be written in full).....
(Signed)

Date:
DECLARED BY:
(Signature)

(1) The interested citizen must state the Authority or Service to which this petition is directed.
(2) Registered in full.
(3) Whoever knowingly declares false information or denies or conceals the true facts in a written sworn statement as per article 8 will be punished by imprisonment for a minimum period of three months. If the perpetrator of these deeds had the intention to gain a pecuniary advantage either for himself or for a third party or had the intention to harm another person, this will be punished by a sentence of up to ten years in prison, if the pecuniary benefit or damage exceeds the amount of twenty five million (25,000,000) Greek Drachmae. In the event that this solemn statement is revoked, the provisions of paragraph 2, article 227 of the Criminal Code shall be enforced.
(4) In case of lack of space the statement is to be continued on the other side of the page and signed by the person submitting the statement.

ATTACHED: PHOTOCOPY OF IDENTITY CARD (BOTH SIDES) OR OF PASSPORT OR OF OTHER DOCUMENT OF IDENTIFICATION.

ALL THE ABOVE IS ONLY FOR EXAMPLE AND THEY ARE NOT TRUE