Accès à l'étude

Parkings: 5 rue Dancourt, 41 Bd de Rochechouart Métro: Abbesses (12), Anvers (2), Pigalle (2, 12)

Bus: 30, 67, 85



■ 8 place Charles Dullin

@chassaint.cercle@paris.notaires.fr

75018 PARIS

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PERSONAL INFORMATION SHEET

To be returned by email, fax or post (with documents requested hereafter)

MISS(ES)/MISTER					
	Name:	Common name (if nee	Common name (if need be):		
	Full first names:				
	Date of birth:				
	Occupation:	Nationality:			
	In case you are a national of a non-EU member state, please provide us with a resident card copy or resident and with your birth certificate translated into French.				
	Matrimonial status (if available, please p	rovide us with your family record book)			
	☐ Single	☐ Widow(er)	☐ Partnership		
	☐ Married - Date and place of marriage/partnership:				
	Matrimonial regime: If available, please provide us with a marriage/partnership contract copy				
	☐ Divorced/separated — Please provide us with a copy of judgement.				
	Gift between spouses : ☐ Signed	☐ Ongoing	☐ To consider		
	Professional status – Particular case				
	 ☐ You are a merchant, an artisan or a company director ☐ You are in a situation of cessation of payments or the subject of collective insolvency proceedings ☐ You are affected by over-indebtedness 				
	Contact details				
	Complete mailing address (with country):				
	E-mail:				
	Home Tel.:	Prof. Tel.:			
	Local tax office address ("SIP"):				
	Other useful details:				
MISS(ES)/MISTER	☐ You confirm you are the only one to have an access to your e-mail adress and accept to receive notified by registered electronic letter.				
111100 (20), 11110 1211	Name:	Common name (if nee	ed be):		
	Full first names:	· ·	,		
	Date of birth:	Place of birth:			
	Occupation:	Nationality:			
	In case you are a national of a non-EU member state, please provide us with a resident card copy or resident permit cop and with your birth certificate translated into French.				
	Matrimonial status (if available, please provide us with your family record book)				
	☐ Single	☐ Widow(er)	☐ Partnership		

If available, please provide us with a marriage/partnership contract copy

☐ Married - Date and place of marriage/partnership:

Matrimonial regime:

	☐ Divorced/separated – <i>Please provide</i> Gift between spouses : ☐ Signed	e us with a copy of judgement. ☐ Ongoing	☐ To consider
	Professional status – Particular case	<u> </u>	
	☐ You are a merchant, an artisan or a con ☐ You are in a situation of cessation of pa ☐ You are affected by over-indebtedness		nsolvency proceedings
	Contact details		
	Complete mailing address (with country):		
	E-mail:		
	Home Tel.:	Prof. Tel.:	
	Local tax office address ("SIP"):		
	Other useful details:		
	☐ You confirm you are the only one to hat by registered electronic letter.		
Observations or spec attention.	ial features - Please, indicate below all in	nformation you think it may be u	useful to bring to your notary's
Done at		, this	
	re(s) and warrant(s) he/she/they transmit is/her/their possession without knowingly		l information they are aware of
Signature(s):			



The information collected by the notary office in this form is processed electronically for the purpose of answering your request. In accordance with the French data protection legislation (Law n° 78-17 of 6 January 1978), you have a right to access and rectify your personal data. To exercise this right, please contact your notary.