

Application for the issue of the Lítačka card



Administrator: Prague Capital City, Mariánské náměstí 2, 110 01 Prague 1, IČ: 00064581 Please fill in the form legibly in block letters with diacritics.

*) These data are mandatory. Without them, the application cannot be accepted.

Barcode space

Reason for request					l	
First card Exchange for another reason Exchange due to expiration						
This is my first personal Litačka card Lita						
The card number whose exchange is requested						
Applicant details From the data given, the name, surname and photos will be printed on the card.						
Name*						
Surname*						
D.O.B.*						
D.O.B.*						Photo space*
Phone number						45 x 35 mm
				d telephone about the pord at the contact point yo		
E-mail						
Correspondence address In the case of the chosen method of taki	ing over the recommended wr	riting variant the finish	ed Lítačka card will be	e sent to this address		I do not consent with the retention of the photo.
Street		rang variant, and miles		House nu	mber Flat nu	mber
					\Box	
Town / City				Postcode		
Declaration and consent	of the holder					
1) I declare that I state all the information in this Application truthfully and accurately. 2) The rights and obligations of the applicant are set out in the Conditions for the Issuance and Use of Chip Cards, which are available at contact points and in electronic form at the web address www.pidlitacka.cz. By signing, I confirm that I have read the current version of the Conditions for Issuing and Using Smart Cards, I understand their content, I agree with them and I undertake to						
abide by them. 3) Submission of this application is charged according to the current price list. More at www.pidlitacka.cz. 4) I acknowledge that this Application, signed by the applicant, constitutes consent to the conclusion of a contract with Prague Capital City, the subject of which is the issuance of the card and the						
management of its life cycle, including ensuring interaction with cardholders made available by card applications. 5) I acknowledge that in connection with the administration of the card and the operation of card applications, there is a process of compliance with the agreement on the provided personal data in						
accordance with Act No. 110/2019 Coll., Processing of personal data, and EU Regulation no. 2016/679 (GDPR). Personal data will be processed for the purpose of issuing the card, managing its life cycle, using the card and services made available to the cardholder through card applications.						
6) Personal data in the range of name, surname and photo can be further processed by the operator of the relevant card application. In such a case, the operator of the relevant card application is the administrator within the meaning of Act No. 110/2019 Coll., on the processing of personal data, as amended. The processor of personal data may also be entities with which the relevant personal data administrator has concluded a written agreement on the processing of The applicant's signature*						
personal data. Information on the processing of personal data is available on the website www.pidlitacka.cz						
I agree to receive information and com	mercial communications conce	erning the LÍTAČKA syste	em. YES	NO		
Consent of the legal representative/agent with this application Mandatory information in case of application on behalf of						
Name						
					that I am the leg	lare honestly gal representative/agent above person.
Surname					or the	above person.
D.O.B.				s	ignature of legal	representative/agent
D.O.B.						
Method of acceptance and payment - to be filled in by the staff						
Card acceptance method	Total ame	ount to be paid		Method of payme	nt	Data verified by
In person at the branch		d, exchange er reason	100 CZK	Cash upon s	ubmission	
Registered letter	Exchange		50 CZK	Card payme upon submis		Date and place of receipt
	expiration	n		Bank Transfe		
In the case of navment of the fee for issuing the chin card by hank transfer send the navment to the account kent with CS as number 300300312/0800 no later than 3 days						

from the submission of the application. Enter the application number (indicated in the upper right corner) as a variable symbol. Enter the text LITACKA in the message for the recipient.