Company name

(stamp)

National registration number

Phone number

Email address

Complete postal address (street, postal code, city, country)

LITHUANIAN TRANSPORT SAFETY ADMINISTRATION

END OF SERIES APPLICATION

– –

Upon the entry into force of the new restrictions specified in _____,
(Regulation EU, Directive or UN Regulation)

please apply the end-of-series procedure to the listed vehicles from _____.
(date)

ADDED:

1. ☐ List of vehicles in electronic (MS excel) format.
2. ☐ Other: _____ .

By submitting the application, I certify that the information provided in it is true and complete.
I am informed about the purpose and procedure of the processing of personal data and I authorise the processing of my personal data in relation to the application of the end-of-series procedure and the collection of information about it in the information system maintained by the Lithuanian Transport Safety Administration.

_____	_____	_____
(position)	*(signature)*	*(first name, family name)*