

Act on the National Classification of Activities (NN, No. 98/94), Decision on the National Classification of Activities – NKD 2007. (NN, Nos 58/07 and 72/07)

## **REGISTER OF BUSINESS ENTITIES**

## **APPLICATION**

FOR A PART OF A BUSINESS ENTITY

To be filled in by C	roatian Bureau of Statistics
SHORT BUSINESS/COMPANY NAME OF THE BUSINESS ENTITY	
IDENTIFICATION NUMBER OF THE BUSINESS ENTITY	
PERSONAL IDENTIFICATION NUMBER OF THE BUSINESS ENTITY (OIB)	
1. DATA ON THE PART OF THE BUSINESS ENTITY	
a) Ordinal number of the part of business entity	
b) Business/company name of the part of business entity	
c) Municipality/Town	
d) Settlement	
e) Street	
f) House number and extension	
g) Postal code	
h) Official telephone number (optional)	
i) Official e-address (optional)	
j) Official fax number (optional)	
2. ACTIVITY	
a) Proposition of a business entity	
(activity class)	
b) Activity defined by the Croatian Bureau of Statistics	
(activity class)	

RPS-2

3. DATA ON CHANGES (TO BE FILLED IN BY CROATIAN E	BUREAU OF STATISTICS)
a) Type of change	
(creation, termination, other change	es)
b) Date of change report to the Croatian Bureau of Statistics	·
c) The change related to the identification number	
d) The unit is kept in a specific register	
NOTICE: All Register data are public data. By signing the RPS-1 and RPS-2 forms, a entity confirm that data entered to the Register are complete, accurate and authentic. The if new information has subsequently been obtained from public (generally available) data form and CEO/authorised person of the business entity shall unequivocally and irrevocand dissemination of all data kept in the Register of Business Entities for statistical and of the statistical	e Croatian Bureau of Statistics holds the right to additional data changes in the Registe ta sets. By signing the RPS-1 and RPS-2 forms, a person who filled in the registratio ably authorise the Croatian Bureau of Statistics to further individual use, public issuin
Date of submitting the registration	
Signature of a person who filled in the registration	Signature of CEO/authorised person of the business entity
Phone/GSM of a person who filled in the registration	
TO BE FILLED IN BY OFFICIALS OF TH	E CROATIAN BUREAU OF STATISTICS
The completeness of entered mandatory information and submission for cons	ideration confirmed by the official of the Croatian Bureau of Statistics
NAME AND SURNAME OF THE EMPLOYEE OF THE CROATIAN BUREAU OF STATISTICS WHO RECEIVED THE APPLICATION	
DATE OF APPLICATION	
ADDITIONAL NOTICES	

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