**Dane osoby upoważnionej do kontaktów ws. wniosku o wydanie tymczasowego pozwolenia na użytkowanie ION dla nowych instalacji odbiorczych, nowych instalacji dystrybucyjnych oraz systemów dystrybucyjnych przyłączonych do systemu dystrybucyjnego**

1. **Osoba upoważniona do kontaktów w sprawie przedmiotowego wniosku   
   (zakres umocowania zawiera pełnomocnictwo – załącznik Nr …. do WNIOSKU)**
   1. Imię

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* 1. Nazwisko

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* 1. Pełna nazwa firmy, w której zatrudniona jest osoba upoważniona do kontaktów   
     *(Nazwę firmy i dane adresowe w pkt xxx do xxx wypełniać tylko gdy są inne niż podane w pkt. xxx do xxx Bezpośrednie dane kontaktowe do osoby upoważnionej wypełnić każdorazowo)*

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* 1. Siedziba i adres
     1. Miejscowość

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* + 1. Ulica Nr

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* + 1. Poczta Kod pocztowy

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* 1. NrTelefonu

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* 1. E-mail

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