**Croatian Transmission System Operator Plc.**

**Kupska 4**

**10000 Zagreb**

**REQUEST FOR AMENDMENT OR CORRECTION OF INFORMATION**

|  |  |  |
| --- | --- | --- |
| **Applicant’s Request** | **Name and Last Name** |  |
| **Legal Entity’s Name** |  |
| **Legal Entity’s Registered Office** |  |
| **Address** |  |
| **Phone** |  |
| **E-mail** |  |

|  |  |
| --- | --- |
| **Data necessary for identification of requested information** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Requested Information** |  | | |
| **Data of Request** |  | | |
| **Data of Information Received** |  | | |
| **Received Information** | Mark with X required | |  | | --- | |  |   Not the information I requested | |  | | --- | |  |   Not complete |
| **Description of requested amendment/correction of information** |  | | |

Please mark below the preferred method of access to the requested information (mark with X required):

|  |
| --- |
|  |

Information delivery in written form

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| --- |
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Documentation insight

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|  |

Documentation copy

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|  |

Delivery of documentation copy

|  |  |
| --- | --- |
| **Submission Date of Applicant’s Request** |  |
| **Location** |  |
| **Applicant’s Signature** |  |

**Note:**

HOPS Plc. as a public authority is entitled to request to cover the actual material expenses incurred by providing information and to cover the expenses of the delivery of the requested information to Applicant’s Request.