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**(ime i prezime / tvrtka podnositelja zahtjeva)**

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**(adresa)**

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**(OIB; obvezno polje!)**

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**(kontakt-broj, e-mail adresa)**



**GRAD ZADAR**

**Upravni odjel za prostorno uređenje i graditeljstvo**

**Odsjek za provedbu dokumenata prostornog uređenja i gradnje**

**ZAHTJEV**

**za izdavanje klauzule pravomoćnosti**

Molim da mi se izda klauzula pravomoćnosti za:

vrsta akta: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

KLASA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

URBROJ: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

datum izdavanja: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zahtjevu prilažem:

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U Zadru, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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(potpis)