

## WMID Access Restoration Application Form

Indicate WM-ID, access to which was lost:

Reason for loosing access to WM-ID \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Application Form to restore access to WM-ID is received. Application Form reference number \_\_\_\_\_

### *Applicant Personal Information*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

ID Type: \_\_\_\_\_ ID Number: \_\_\_\_\_

Issued by: \_\_\_\_\_

Place of issue (Country/City): \_\_\_\_\_ Date of issue (MM/DD/YYYY): \_\_\_\_\_

Nationality: \_\_\_\_\_ Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Place of Birth (Country/City): \_\_\_\_\_

### *Permanent residential address*

Street: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

State/District: \_\_\_\_\_ (Country/City): \_\_\_\_\_

### *Contact information*

Contact phone number(s): \_\_\_\_\_

Personal email address: \_\_\_\_\_ WWW: \_\_\_\_\_

My signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_