Приложение № 1  
к приказу МВД России от 05.09.2023 № 655

Форма

УВЕДОМЛЕНИЕ  
об осуществлении трудовой деятельности иностранным гражданином  
или лицом без гражданства, получившим патент

Настоящее уведомление представляется в

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(наименование территориального органа МВД России на региональном и районном уровнях)

1. Сведения об иностранном гражданине (лице без гражданства)

| 1.1. Фамилия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1.2. Имя |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1.3. Отчество  (при наличии) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1.4. Гражданство |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1.5. Дата рождения |  |  |  | |  |  |  | |  |  |  |  |
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|  | (число) | | | (месяц) | | | | (год) | | | | | |

| 1.6. Документ, удостоверяющий личность |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | (наименование) | | | | | | | | | | | | | | | |

| Серия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Дата выдачи | |  |  |  | |  |  |  | |  |  |  |  |
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|  | (число) | | | | (месяц) | | | | (год) | | | | | |

| Кем выдан |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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2. Сведения о патенте, на основании которого иностранный гражданин (лицо   
без гражданства) осуществляет трудовую деятельность

| Серия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  | |  |  |  |  |
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3. Профессия (специальность, должность, вид трудовой деятельности) по трудовому   
или гражданско-правовому договору

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4. Сведения о месте осуществления трудовой деятельности

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(населенный пункт, улица, № дома (строения), № комнаты (квартиры, помещения) (при наличии)

| 5. Трудовая деятельность осуществляется иностранным гражданином (лицом  без гражданства) на основании: | (нужное отметить | Х | или | V | ) |
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|  | – трудового договора |  | – гражданско-правового договора на выполнение работ (оказание услуг) |
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|  | – гражданско-правового договора на выполнение работ (оказание услуг), заключенного в устной форме |
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| 6. Дата заключения гражданско-правового договора на выполнение работ (оказание услуг) (указывается в случае заключения в устной форме) | |  |  |  | |  |  |  | |  |  |  |  |
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|  | (число) | | | | (месяц) | | | | (год) | | | | | |

| 7. ИНН |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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8. Сведения о действующем договоре (полисе) добровольного медицинского   
страхования, либо договоре о предоставлении платных медицинских услуг,   
либо действующем полисе обязательного медицинского страхования:

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(наименование и реквизиты документа)

| Серия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Дата выдачи | |  |  |  | |  |  |  | |  |  |  |  |
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|  | (число) | | | | (месяц) | | | | (год) | | | | | |

| 9. Контактный телефон |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 10. Адрес электронной почты |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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11. Сведения о заказчике работ (услуг) (указывается в случае заключения гражданско-правового договора на выполнение работ (оказание услуг) в устной форме)

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(полное наименование юридического лица/филиала иностранного юридического лица/представительства)

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иностранного юридического лица, фамилия, имя, отчество (при наличии) индивидуального

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предпринимателя/адвоката, учредившего адвокатский кабинет/частного нотариуса/физического лица – гражданина Российской Федерации)

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(для юридических лиц – государственный регистрационный номер записи в Едином государственном   
реестре юридических лиц, для филиалов или представительств иностранных юридических лиц –

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номер документа, подтверждающего факт аккредитации филиала или представительства иностранного юридического лица, для индивидуальных предпринимателей – государственный регистрационный

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номер записи в Едином государственном реестре индивидуальных предпринимателей,

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для частных нотариусов – номер лицензии на право нотариальной деятельности, для физического лица –

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наименование документа, удостоверяющего личность, его серия и номер, кем и когда выдан,

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ИНН, место нахождения (для физического лица – адрес фактического места жительства) работодателя

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или заказчика работ (услуг): индекс, субъект Российской Федерации, район, город/населенный пункт,

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улица, дом, квартира/офис)

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| Контактный телефон |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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12. Об ответственности за сообщение ложных сведений в уведомлении или   
представлении поддельных документов предупрежден. С обработкой, передачей   
и хранением персональных данных согласен. Достоверность сведений, изложенных   
в настоящем уведомлении, подтверждаю

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(подпись и фамилия, имя, отчество (при наличии) иностранного гражданина (лица без гражданства)

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