***Obrazac broj 2 – Zahtjev za pristup informacijama***

***INSTITUT ZA*** ***ETNOLOGIJU I FOLKLORISTIKU***

*(naziv tijela javne vlasti)*

***ŠUBIĆEVA 42, ZAGREB***

*(adresa i sjedište)*

**ZAHTJEV ZA PRISTUP INFORMACIJAMA**

***Podnositelj zahtjeva***

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*(ime i prezime/naziv)*

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*(adresa/sjedište)*

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*(telefon i/ili e-pošta)*

***Informacija koja se traži***

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***Način pristupa informaciji*** *(označiti):*

*□ neposredan pristup informaciji*

*□ pristup informaciji pismenim putem*

*□ uvid u dokumente i izrada preslika dokumenata koji sadrže traženu informaciju*

*□ dostavljanje preslika dokumenata koji sadrži traženu informaciju*

*□ na drugi prikladan način (elektronskim putem ili drugo)*

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*(vlastoručni potpis podnositelja zahtjeva)*

*U \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, dana \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ godine.*

***Napomena:*** *Institut za etnologiju i folkloristiku ima pravo na naknadu stvarnih materijalnih troškova od podnositelja zahtjeva u svezi s pružanjem i dostavom tražene informacije.*