| CCU | application | no./Registration no.: | |
|-----|-------------|-----------------------|--|

DIR-144-N(E)

Registrar

Application for Alteration of Contact Information

| Name : | | | | | | | | | |
|------------------------|------|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
| Resident ID Card No. : | Tel: | | | | | | | | |

I hereby apply to change my contact information as follows (only select the items to be changed and provide the new information)

| Address (Please fill in your address in corresponding fields in the following format) | | | | | | | |
|--|--------------------------|----------------------|--|--------------------------|----|--|--|
| Attention: If | you provide both Macao a | and foreign address, | DSI will only reco | ord your address in Maca | 0. | | |
| Macao : | Macao Penisula | 🗌 Taipa | [| Coloane | | | |
| Street : | | | | N.º : | | | |
| Duilding | Block : | Floor: | Flat : | | | | |
| Building : | Block | Floor · | Flat . | Others : | | | |
| Foreign Address : | | | | | | | |
| Local mobile number : DSI will send SMS to your local mobile number. Please select the language for the SMS: Chinese Portuguese English | | | Telephone : () Foreign mobile number : | | | | |
| | | | () | | | | |
| 🗌 Email: | | | | | | | |
| | | | | | | | |

Other attached documents :

If DSI needs to call the applicant for application matters, the phone conversation will be recorded.

 \Box I do not agree to record the phone conversation. I request DSI to contact me by SMS or letter.

Date : ____/___/____

Signature

(Please sign according to your Resident ID Card) :_____

For underage applicant, interdicted person or quasi-interdicted person,

the application form has to be signed by the parent or legal representative : _____