



**MODELLO DI PAGAMENTO:  
TASSE, IMPOSTE, SANZIONI  
E ALTRE ENTRATE**

**1. VERSAMENTO DIRETTO AL CONCESSIONARIO DI**

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**2. DELEGA IRREVOCABILE A**

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AGENZIA/UFFICIO 



 PROV.

PER L'ACCREDITO ALLA TESORERIA COMPETENTE

**3. NUMERO DI RIFERIMENTO (\*)**

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**DATI ANAGRAFICI**

4. COGNOME, DENOMINAZIONE O RAGIONE SOCIALE SESSO M o F <table border="1" style="width: 20px; height: 15px;"></table>	NOME PROV. <table border="1" style="width: 20px; height: 15px;"></table>	DATA DI NASCITA <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">giorno</td> <td style="width: 25%;">mese</td> <td style="width: 25%;">anno</td> </tr> <tr> <td><table border="1" style="width: 20px; height: 15px;"></table></td> <td><table border="1" style="width: 20px; height: 15px;"></table></td> <td><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	giorno	mese	anno	<table border="1" style="width: 20px; height: 15px;"></table>	<table border="1" style="width: 20px; height: 15px;"></table>	<table border="1" style="width: 20px; height: 15px;"></table>
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COMUNE (o stato estero) DI NASCITA / SEDE SOCIALE <table border="1" style="width: 100%; height: 15px;"></table>	CODICE FISCALE <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>	<table border="1" style="width: 20px; height: 15px;"></table>	<table border="1" style="width: 20px; height: 15px;"></table>	<table border="1" style="width: 20px; height: 15px;"></table>			
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**DATI DEL VERSAMENTO**

6. UFFICIO O ENTE <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;"><table border="1" style="width: 20px; height: 15px;"></table> codice</td> <td style="width: 50%;"><table border="1" style="width: 20px; height: 15px;"></table> sub. codice (*)</td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table> codice	<table border="1" style="width: 20px; height: 15px;"></table> sub. codice (*)	7. COD. TERRITORIALE (*) <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>	8. CONTENZIOSO <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>	9. CAUSALE <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>	10. ESTREMI DELL'ATTO O DEL DOCUMENTO <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">Anno</td> <td style="width: 75%;">Numero</td> </tr> <tr> <td><table border="1" style="width: 20px; height: 15px;"></table></td> <td><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	Anno	Numero	<table border="1" style="width: 20px; height: 15px;"></table>	<table border="1" style="width: 20px; height: 15px;"></table>
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11. CODICE TRIBUTO <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>	12. DESCRIZIONE (*) <table border="1" style="width: 100%; height: 100px;"> <tr><td style="height: 20px;"></td></tr> </table>											13. IMPORTO <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> <tr> <td><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>	14. COD. DESTINATARIO <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;"><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> <tr> <td><table border="1" style="width: 20px; height: 15px;"></table></td> </tr> </table>	<table border="1" style="width: 20px; height: 15px;"></table>																		
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PER UN IMPORTO COMPLESSIVO DI EURO

EURO (lettere)

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ESTREMI DEL VERSAMENTO (DA COMPILARE A CURA DEL CONCESSIONARIO, DELLA BANCA O DELLE POSTE)			
DATA		CODICE CONCESSIONE/BANCA/POSTE	
		AZIENDA	CAB/SPORELLLO
giorno	mese	anno	
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FIRMA

Autorizzo addebito sul conto corrente bancario	
n. _____ / _____	cod. ABI      CAB
firma _____	



