

Postal Address Permission Statement

_	Postal Address Permission Statement		
	Surname *	son statement	First names *
	Date of Birth *		Place of Birth *
	Telephone number *		Email address *
	Address *		
	Postcode *	Town *	
	Confirms to consent to the following person(s) being registered with a postal address at his/her address.		
	Postal address applica	nt	
	Surname *		First names *
	Date of Birth *		
-	Postal address co-appl i Surname	cants	First names
	Date of Birth		
	Surname		First names
	Date of Birth		

The undersigned confirms to be aware that

- he/she is obliged to ensure the person registered at the postal address will receive any postal items intended for him/her.
- he/she is obliged, at the request of the municipal council, to provide information in person and to
 produce the documents necessary for keeping the Personal Records Database (BRP) up to date

Town *

Date *

Signature *

Please don't forget to include a copy of your proof of identity as the postal address holder.

Privacy

The municipality handles your data with care. You can read more about this on the following website: <u>Rotterdam.nl/privacy</u>.