*Annex no. 15 to Minister of Interior Decree no.9/2024 (of II.29.)*

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**National Directorate-General for Aliens Policing**

**Országos Idegenrendészeti Főigazgatóság**

**Notification form for reporting place of accommodation**

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| ***For completion by the authority.*** |
| The authority receiving the notification form (code and name):                      |
| Date of receipt of the notification form:      year       month       day |
| **Please complete the form legibly, In LATIN block letters.** |
| Telephone number:                                | Email address:                                |
| **1. Personal data of the applicant** |
|  Surname:                                |  Forename:                                     |
| Sex: [ ]  male [ ]  female |  Citizenship:  |
| **2. Mother’s surname and forename at birth:** |
|  Surname:                                |  Forename:                                     |
| **3. Date of birth:**      year       month       day |  |  **4. Place of birth:**                                     |
| **5. Marital status:** [ ]  unmarried [ ]  married [ ]  divorced [ ]  widow(er) |
| **6. Document number and date of expiry of the passport:**                         ,       year       month       day |
| Document number of the residence permit:                           |

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| **7. Full address of the place of accommodation** |
|  Postal code:       |  Parcel identification/land register reference number (topographical LOT no.):       | Locality:                 |  Name of the public place:            |
| type of the public place (i.e. street, road, square, etc.):            | Street number:       | Building:       | Stairway:       | Floor:       | Door:       |
|  Legal title of residence in the place of accommodation: [ ]  Owner [ ]  (Sub)tenant [ ]  Family member [ ]  Courtesy user of accommodation [ ]  Other, specifically:                 |

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| Date: .................................................……………………………………….. ……………………………………….. Signature(s) of the providers of the place of accommodation Signature of applicant |