*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: | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **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 |