

## **DECLARATION OF CONSENT RESIDENTIAL**

## The undersigned,

Name and initials	:	
Date of birth	*	
Place of birth	:	
Address		
Residence		
Phone number		

hereby agrees to the registration of:

Name	First name	Date of birth	Place of birth
		2	

## at his/her address.

Place	:
Date	:
Signature	:

Don't forget to send a copy of your ID!