

Proof of accommodation

Please bring the original certificate with a copy of the identity card of the owner

- The tenant will live alone in his own household
- The tenant will live together with the owner in a household.
- The tenant will live together in one household with my other tenant Mr/Ms.....
(name of the tenant)
- Date of birth tenant

The undersigned
(Name of the owner)

Living at
(Address of the owner)

Date of birth :
(Date of birth of owner)

Owner of

- the house
- the apartment

at Strassen, street n° floor.....

gives the authorisation to the following people to establish their residence at the address named before
(starting date of the authorisation)

Last Name and first name, Date and place of birth:

Last Name and first name, Date and place of birth:

Strassen,
(date)

.....
Signature of the owner

Protection of personal data:

The personal data collected through this form will be processed by the Strassen municipal administration in order to process your request. You have the right to access, oppose and rectify your personal data as well as the right to withdraw your consent in accordance with the European Data Protection Regulation of 25 May 2018. Following the granting of a subsidy, you will no longer be able to withdraw your consent. The data collected will then be kept for 10 years from the date of granting of this subsidy, in accordance with the legal requirements of the Luxembourg Code de Commerce.