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| **A** | | | | ***Vom Antragsteller auszufüllen*** *(Angaben zur berechtigten Person, die die Bestattung veranlasst hat)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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|  | | Geburtsdatum | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Personenkennzeichen (Identifikationsnummer) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Staatsangehörigkeit | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | | Wohnsitzadresse in der Slowakischen Republik 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Aufenthaltsadresse in der Slowakischen Republik 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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| **B** | | | | ***Angaben zum Verstorbenen*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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|  | | Geburtsdatum | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Personenkennzeichen (Identifikationsnummer) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Staatsangehörigkeit | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | | Wohnsitzadresse in der Slowakischen Republik 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Aufenthaltsadresse in der Slowakischen Republik 1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | Straße | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Hausnummer | | | | | | | |  | | | | | | | | | | | | | |  | |
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|  | | Datum des Todes | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | |  | | | | Ort des Todes | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| **C** | | ***Zahlungsweise*** | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Auf ein Bankkonto in der Slowakischen Republik | | | Kontonummer | | |  | |  | |  | |  |  |  | |  |  |  |  | Bankleitzahl |  |  |  |  |  |
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|  | Wird kein Konto aufgeführt, wird die Summe in bar an die Wohnsitzadresse in der Slowakischen Republik / an die Aufenthaltsadresse in der Slowakischen Republik\* ausgezahlt.  \*Unzutreffendes bitte streichen | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **D** | | | | ***Erklärung des Antragstellers*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  | |
|  | | Ich erkläre hiermit, dass alle Angaben der Wahrheit entsprechen und dass ich mir der Rechtsfolgen bewusst bin, die sich aus falschen Angaben in diesem Antrag ergeben können. Ich bin mir meiner Verpflichtung bewusst, den zu Unrecht erhaltenen Betrag der Bestattungsbeihilfe zurückzuerstatten.  **Information für den Antragsteller**  Das Amt für Arbeit, Soziales und Familie – IdNr. 30794536 – verarbeitet Ihre personenbezogenen Daten (einschließlich der personenbezogenen Daten der gemeinsam beurteilten Personen) im Sinne des Gesetzes Nr. 238/1998 Slg., über die Bestattungsbeihilfe, in der jeweils gültigen Fassung, und leitet die oben genannten personenbezogenen Daten an öffentliche Behörden weiter. Bei Unklarheiten, Problemen oder Fragen, die mit dem Schutz personenbezogener Daten zusammenhängen, können Sie sich an die folgende E-Mail-Adresse wenden:  [**ochranaosobnychudajov@upsvr.gov.sk**](mailto:ochranaosobnychudajov@upsvr.gov.sk)**.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| **E** | | | | | Vom Bestattungsunternehmen 2) auszufüllen, das die mit der Bestattung verbundenen Dienstleistungen erbracht hat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |  | | |  | |  | |
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|  | | Geburtsdatum | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Personenkennzeichen (Identifikationsnummer) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Staatsangehörigkeit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| **F** | | | | | | ***Für die Übereinstimmung der Daten mit dem Original*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |  | | |  | | |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  | |
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| **Zum Zweck der Beurteilung der Übereinstimmung der im Antrag angegebenen Daten hat der Antragsteller folgende Dokumente vorzulegen** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  | |
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|  | | * Personalausweis des Antragstellers oder Ausweis – Aufenthaltsgenehmigung eines Ausländers oder Ausweis eines ausländischen Slowaken und Reisepass des Antragstellers (Ausländer und ausländischer Slowake).   **Der Antragsteller hat dem Antrag folgende Dokumente und Bescheinigungen beizufügen**   * Bestätigung der zuständige Grenz- und Ausländerabteilung der Bezirkspolizeidirektion über den vorübergehenden Aufenthalt des verstorbenen Ausländers in der Slowakischen Republik und die Dauer, für die der vorübergehende Aufenthalt genehmigt wurde (falls es sich nicht um einen verstorbenen Ausländer handelt, der den Status eines „ausländischen Slowaken“ erlangt hatte); * **verstorbener Ausländer:** Sterbeurkunde (Original und Fotokopie) bzw. amtliche Übersetzung der Sterbeurkunde eines Ausländers, dessen Sterbeurkunde im Ausland ausgestellt wurde, oder amtliche Übersetzung anderer Dokumente und Bescheinigungen, die in einer Fremdsprache ausgestellt wurden, mit Ausnahme der Ausstellung solcher Urkunden durch die zuständigen juristischen Personen in der Tschechischen Republik in tschechischer Sprache; * bei Ausübung einer Erwerbstätigkeit oder beim Bezug einer Rente von der Slowakischen Republik durch die verstorbene Person, sofern diese Person Staatsangehöriger eines anderen Mitgliedstaats war und zum Tag ihres Todes in der Slowakischen Republik eine Erwerbstätigkeit ausgeübt oder eine der Rentenleistungen in der Slowakischen Republik bezogen hat. * Bestätigung des Innenministeriums der Slowakischen Republik, sofern es sich um einen Fall gemäß § 23 (1) (a) bis (d) des Gesetzes Nr. 154/1994 Slg. über Personenstandsregister handelt, d. h. dass der Tod eines Bürgers der Slowakischen Republik wie folgt eingetreten ist:  1. im Hoheitsgebiet eines fremden Landes, 2. an einer Vertretungsbehörde der Slowakischen Republik, 3. auf einem Schiff oder in einem Flugzeug außerhalb des Hoheitsgebiets der Slowakischen Republik, 4. in Gebieten, die keinem Staat angehören | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | | **Zahlenangaben** | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | |  | | | |  | | | |  | | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  | |
|  | | 1. entsprechende Art des Aufenthalts in der Slowakischen Republik gemäß dem Muster markieren, wobei der vorübergehende Aufenthalt nur für Ausländer gilt 2. wenn die Dienstleistungen eines Bestattungsunternehmens (Krematorium) nicht in Anspruch genommen wurden, werden die Angaben in Teil E des Antrags von der Gemeinde bzw. vom Friedhofsverwalter (juristische Person) des Friedhofs ausgefüllt, auf dem die Bestattung stattgefunden hat. Falls die Bestattung im Ausland stattgefunden hat, muss die berechtigte Person die Veranlassung der Bestattung durch amtlich übersetzte Dokumente über die Veranlassung der Bestattung nachweisen. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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