

Daily stamp of the registration office:

REGISTRATION WITH THE REGISTRATION OFFICE

(Please fill in in block letters)

NEW APARTMENT

Street, house number	
Zip code, city	
Move-in date	
The new apartment is <input type="checkbox"/> only apartment / main apartment <input type="checkbox"/> Secondary residence	
Details of the housing provider:	
Name	
Street, house number	
Zip code, city	

PREVIOUS APARTMENT

Street, house number	
Zip code, city	
State	
This apartment was <input type="checkbox"/> only apartment / main apartment <input type="checkbox"/> Secondary residence	
last apartment in Germany (to be filled in only if moving from abroad, if available)	
Move-out date	
Street, house no.	
Zip code, city	

PERSONAL DATA:

Family name, with doctorate if applicable					
Previous names (e.g. birth name)					
First name/s (<u>underline</u> call name)					
Gender					
Date of birth					
Birthplace					
Country of birth					
Nationality					<input type="checkbox"/> german <input type="checkbox"/>
Religion					
Order or artist name					
Passport or identity card	Exhibition Authority	Date of issue	Validity date	Serial number	

FAMILY STATUS:

<input type="checkbox"/> single
<input type="checkbox"/> married
<input type="checkbox"/> widowed
<input type="checkbox"/> Marriage divorced
<input type="checkbox"/> Marriage annulled
<input type="checkbox"/> Civil partnership leading
<input type="checkbox"/> Civil partnership dissolved
<input type="checkbox"/> Civil partnership annulled
<input type="checkbox"/> not known
if married or in a civil partnership, dates of (last) marriage/formation of civil partnership
Date
Location

Information about the spouse/life partner who is not moving into this apartment with you:

Family name, doctoral degree if applicable:		Gender:	
First name/s:		Date of birth:	
Address (zip code, city, street, house number)			

Information about children up to the age of 18 who do not move into this apartment with you:

Family name	First name/s	Gender	Date of birth	Address (zip code, city, street, house number)

Details of other apartments in Germany:

Status of the other apartment	Zip code, city, street, house number
<input type="checkbox"/> Main apartment <input type="checkbox"/> Secondary residence	
<input type="checkbox"/> Main apartment <input type="checkbox"/> Secondary residence	
<input type="checkbox"/> <input type="checkbox"/>	

Main apartment	Secondary residence	
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Please note the instructions for free registration of data transfer and information blocks. You can obtain these from any BürgerServiceCenter or on the Internet at www.service.bremen.de.

Place, date

Signature of the person required to register

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