

Regel uw belastingzaken via uw persoonlijke pagina op

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IBAN-rekeningnr.: NL18 INGB 0002120407 BIC-code: INGBNL2A

> xx-xx-2019 123456789 654321 xx-xx-2019 Your reaction from: Tax invoice number: File number: Date: BSN number: xxxxxxxx

> > Birth date: 19xx-xx-xx

## 

Tax invoice number	Tax year	ar		
123456789	2018		_	
What is your phone number?				
What is your e-mail address?				
1. Living conditions				
You live alone You are married or are li You are a single parent of	ring together (with partner or with live-in children under the	r roommate) a doc	ment with th	an 3 roommates, atta reir names, birth date o you and income.
☐ You live alone☐ You are married or are li		r roommate) a doc e age of 18)	ument with the elationship to	reir names, birth date
☐ You live alone ☐ You are married or are li ☐ You are a single parent ( Roommates or partner:	with live-in children under the	r roommate) a doc e age of 18)	ument with the elationship to	neir names, birth date o you and income.
☐ You live alone ☐ You are married or are li ☐ You are a single parent ( Roommates or partner:	with live-in children under the	r roommate) a doc e age of 18)	ument with the elationship to	neir names, birth date o you and income.
☐ You live alone ☐ You are married or are li ☐ You are a single parent ( Roommates or partner:	with live-in children under the	r roommate) a doc e age of 18)	ument with the elationship to	neir names, birth date o you and income.

## 3. Car and/or motorcycle

Do you own a car and/or a motorcycle?

 $\hfill \Box$  If yes, please mention the license plate numbers and attach a copy of your registration certificate □ No

The car has to be registered in your name. If it has a value of more than € 2,200 you are not eligible for remission.

Is the vehicle essential due to a disability, illness or work?

□ If yes, attach a copy of a disability parking permit registered to your name or a statement of an independent doctor or of your employer

## 4. Income of you and/of your partner

What income do you have?

□ Salary ☐ Allowance of the SVB □ Participation law allowance □ Allowance of the UWV

 $\hfill\Box$  DUO study loan □ Other (e.g. pension, German interest, income as an independent contract)

Attach copies of all recent income specifications of you and your partner. It is not allowed to attach a bank statement or annual statement. If you receive finances from DUO, attach the award letter of DUO.

5. Tax credit on income  De your propries a tay gradit from the Releating dispat?					
	u receive a tax credit from the Belastingdienst?				
o 1					
6. Alimony  Do you pay or receive alimony?					
_ N	□ If yes, attach a copy of the proof of payment or proof of receiving and the ruling over the alimony which states the amount of				
	the alimony.				
7. Owning a house  Do you own a house?					
_ N					
	Outstanding mortgage debt:				
Do you have a savings credit or investment credit on your morgage?					
_ N	☐ If yes, attach a copy of the most recent annual overview of your mortgage including the credit.				
Do y	u receive a provisional refund of your mortgage interest?				
_ N	☐ If yes, attach a copy of the provisional refund of your mortgage interest from the Belastingdienst				
8. F	enting a house, room or apartment				
Doy	ou rent a house, room or apartment?				
<sub>-</sub> 1	□ If yes, attach a copy of your most recent rent contract.				
9. <sub>F</sub>	ealth Insurance				
Atta	n a copy of the most recent health insurance policy of you and your partner, stating the premium.				
10.	Child care				
Do y	u pay for child care?				
_ I	If yes, attach a copy of the most recent invoice for child care (when paying an amount that changes every month, please attach the invoices of the last 3 months).				
11.	Benefits from Belastingdienst				
Do y	u receive rent benefits/subsidy?				
□ N	□ If yes, attach a copy of the most recent decision on the amount of your rent subsidy from the Belastingdienst.				
Do you receive health benefits/subsidy?					
o 1	If yes, attach a copy of the most recent decision on the amount of the health subsidy for you and your partner from the Belastingdienst.				
Do you receive child care benefits/subsidy and/or a provision on child care costs?					
U !	If yes, attach a copy of the most recent decision of the child care subsidy from the Belastingdienst and /or the most recent decision on provision of child care from the municipality or UWV.				
Doy	ou receive a child-related budget?				
<b>1</b>	If yes, attach a copy of the most recent decision on the child-related budget from the Belastingdienst.				
10. Debts Belastingdienst					
Are	ou paying off for an outstanding debt for income tax, the child-related budget or subsidies at the Belastingdienst?				
_ N	☐ If yes, attach a copy of the payment regulation and the proofs of payment of the fulfilled payments.				
11. Automated check for remission					
Through an automated check for remission, the intelligence agency checks of you are eligible for automated remission. If you are, you do not have to submit a request any more. If you do not want that your personal details are used, you can check the box below.					
_ I	o <u>not</u> want to be eligible for the automated remission.  If you do not have a job in The Netherlands, the government has no information about				
I de	are to have filled out this form according to the truth, you so you can tick the box.				
Nam	Signature: Date:				