## Address registration form - A -

Declaration of permitted official postal address of employer



Name of company/ institution/ organisation	HCL Technologies BV			
Name of contact person	Wilma Geerlinks			
Telephone number	070 - 7010622	Email address	wilm	na.g@hcltech.com
Official postal address	Hoogoorddreef 62	Postcode and city/	Postcode and city/town 1101 BE AMSTERDAM	
Name of employee Name of spouse/ registered partner	The undersigned agrees that the use the official postal address of Abhishek Pandey	the employer. Date	partner/ch of birth	ild listed below is/are permitted to
Name(s) and date(s) of birth of children			of birth	
		Date	of birth	_ பயிப்பிப்பட
		Date	of birth	
		Date	of birth	
		Date	of birth	

For other individuals included in the household, a separate declaration must be filed.

## The undersigned

Declares to have filled in the above details truthfully

 Acknowledges that this is the visiting address of the employer and the employer guarantees all mail received at this visiting address reaches the employee

 Acknowledges that the employer guarantees that the employee will inform the municipality of a change of address within 5 working days after moving to a new residence.

Signature of employer's contact person:

CL Technologies B.V.

Authorised Signatory

Hoogoorddreef 62

BE Amsterdam

1 (0) 683 162 018

Place AMSTERDAM

Date 2 4 0 3 2 0 2 5

Stamp of company institution/ organisation\*

Please note that the option of registering employees at the employer's address is only a temporary measure, valid for a maximum of three months.

After this time the employee is obliged to register his/her real address with the municipality.

Please visit our website www.iamsterdam.com/en/local/move/change-of-address for information on how to register a change of address. We kindly request you to inform your employees about this necessity.

Bring this form to IN Amsterdam

WTC Amsterdam Tower Two, first floor Strawinskylaan 1767 1077 XX Amsterdam

<sup>\*</sup> If a company stamp is not available, please include a copy of a legitimate ID of the employer's contact person.