

Self-confirmation of professional necessity of the overnight stay

From _____ to _____

Name: _____ Date of Birth: _____

Street: _____

Zip, City: _____

I work as _____ and I am

☐ self-employed ☐ not self-employed

and hereby declare, that my overnight stay was for professional / business purposes.

Professional information

- For employees:

Name and address of the employer: _____

- For self-employed professionals:

Business address: _____

Tax number and tax office: _____

Note on data protection

The submission of this document to the accommodation establishment is voluntary and is intended solely for determining the tax liability. If requested by the authorities, the data collected will be redirected to the tax office of Marzahn-Hellersdorf, which reserves the right to verify the submitted information in individual cases.

In case the company/guest fails to agree with the above, the tax must be levied on principle. It is however possible to apply for a later refund by presenting proof of the professional expenses directly to the local tax office Marzahn-Hellersdorf.

By submitting this document to the accommodation establishment, the undersigned agrees, that all information provided within this form may be used for the above mentioned purposes.

Please note

The company/ guest will be held liable for the correctness and accuracy of the information. Providing false information to evade taxation may be prosecuted as a federal offense under German law.

Date and place

ÜnSt 4 – Eigenbestätigung

signature