



Bakkahvammur hses.

Instructions

The relevant information must be filled in, if information is incorrect registration may be rejected. Fields marked * are required. When the application has been completed, it must be submitted with the required documents to the email address: bakkahvammur@dalir.is

Information on applicants

Name *	Date of application *
Email address *	Social security number *
Zip code and city *	Legal address *
Phone number *	Union *
Add spouse / another resident:	
Spouse <input type="checkbox"/>	
Name	Social security number
Resident <input type="checkbox"/>	Connection to resident:
Name	Social security number
Add a child under the age of 20 years old:	
Name	Social security number
Name	Social security number
Name	Social security number
Name	Social security number
Unborn child on the way <input type="checkbox"/>	

Your total income (and your spouse) before tax * :	
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Resident applies for:	
Apartment with wheelchair access	
Apartment without any pets	
Apartment that allows pets	

Current housing situation * :

Please note that when an application is submitted, it is taken as the applicant's consent to allow Bakkahvammur hses. to obtain any further information about the applicant that is required to process the application, such as from the tax commissioner. **Required documentation with application:** Copy of last year's tax return and a copy of the applicant's last three paychecks.