City of Ostrava **Confirmation**

**City Authority**

**Confirmation of employment / source of income**

**for an application for the lease of a municipal apartment**

*(THE ISSUE DATE OF THE CONFIRMATION MUST BE NO MORE THAN 3 MONTHS BEFORE THE CONFIRMATION IS SUBMITTED)*

**I. Basic information about the applicant:**

**Name and surname:** **Title:** **Date of birth:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Applicant’s source of income – mark x in the appropriate boxes**

□ I am an employee

* I am self-employed
* I am listed in the Labour Office’s register of jobseekers
* I am a recipient of a state pension or similar income
* I am a recipient of state social security benefits or similar income
* I am a recipient of income support benefits or similar income
* I am a recipient of another form of monetary income

(give details.........................................................................................................)

As confirmation of the above, I append the following documents (mark x in the appropriate boxes)

* confirmation of employment
* business registration certificate or similar document
* confirmation from the Labour Office
* pension assessment or similar document
* assessment for state social security benefits or similar income
* assessment for income support benefits or similar income
* confirmation of other monetary income

(give details.........................................................................................................)

Place and date: ………………………………………….

………………………………………………………….

Applicant’s signature

**OSTRAVA!!!**

City of Ostrava **Confirmation**

**City Authority**

**Confirmation of employment**

**for an application for the lease of a municipal apartment**

**I. Basic information about the applicant (employee)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name and surname:** **Title:** **Date of birth:**

1. **Basic information about the employer**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employer (name):** Company ID no.:

**Employer’s address (headquarters):**

Street, building no.: City: Post code: Tel.:

1. **Contract of employment**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of commencement of employment:** ....................................................

**Contract concluded for:** a fixed period up to ………………………. an unlimited period

**Place of employment:**

Street, building no.: ...................................................... City:................................. Post code:…...............

**Declaration by the employer:**

We hereby confirm that the employee is not involved in discussions with us on the termination of their contract of employment, that we have not concluded an agreement with the employee on the termination of their contract of employment with an agreed date of termination, and that no period of notice of termination of employment or any similar period is currently in progress.

Date of issue: ..............................................

……………………………………………………….

Employer’s stamp and signature

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