



gemeente
SCHIERMONNIKOOG

Emigration

Aan Burgemeester en wethouders
van de gemeente Schiermonnikoog
Nieuwestreek 5
9166 LX Schiermonnikoog

1. Personal data

- a. Family name
- b. Given names
- c. Date of birth
- d. Male / female

2. Old address

- a. Street + no.
- b. Postal code + city

3. New address

- a. Street + no
- b. Postal code + city

4. Other members of your family leaving with you

- a. Family name, initials
and date of birth

5. Person(s) staying at the old address (Yes / No)

6. Date of emigration

Place _____ Date _____

Signature _____

** Please add a copy of your identity card*