



KOLLEGIEKONTORET I AARHUS

NORDHAVNSGADE 1, 1. TH 8000 AARHUS C.

Written authority

Two persons applying for housing together must have a written authority from both applicants if the authority is given to a third person. If you do not have a Danish social security number, please enter your birthday instead.

I,

Name: _____

Social security number (Cpr-nr.): _____

hereby give permission for:

Name: _____

Social security number (Cpr-nr.): _____

to:

(Mark with a cross)

Reply to housing offers

Reply to emails from Kollegiekontoret

Receive information about my application

Check out the premises

Sign lease

Pick up keys

Participate in the housing inspection

Give notice of termination

Other: _____

Other: _____

Other: _____

Period of time where the written authority is valid:

_____ (enter start date) _____ (enter end date)

Aarhus,

Signature

Application no. or lease no. cf. the contract.