









New registration – Letting

Please either print the form and fill it out by hand or fill it out on the computer and then print and sign it.

Identification/con	tact details:			
First and surname of the accommodation p Other contact person:		ovider: Date of birth:		
			Name of business:	
Property address (Stre	eet, postcode, town):			
Invoice address (Stree	et, postcode, town):			
Phone number:	E-n	nail:		
Details about the business:		V 1:16		
Registration	Re-registration	Valid from:	number of beds: extra beds:	
Signing	g off			
Letting type: private rental (up to 10 beds, residence of the landlord)		commercial rental (more than 10 beds, clarification with the trade authority takes place through the accommodation provider)		
Administration:				
Guest registration:	electronic	guest register sheet collection		
Delivery:	by email	by post		
Business number assig tourism association:	ned by the			
Tourism association (processed by):			Ition provider: e above information and the receipt of	a copy is confirmed)

Date, Signature Date, Signature Page 1 of 1