

<b>Please take notice of the instructions for filling out the form!</b>			<b>The following information is required subject to sect. 13, 15, 17 and 18 of the Registration Laws.</b>			Daily stamp of the registry office		
<b>APPLICATION for registration -</b>						<b>Please print the German form below!</b>		
Date of move/relocation		Day	Month	Year	Gemeindegchlüssel	Gemeindegchlüssel		
					<b>09.1.62.000</b>			
New residence (street/place, number, floor)					previous residence (street/place, number, floor)			
(ZIP/Postal code) (town, community) <b>München</b>					(ZIP/Postal code, town/community; if in a foreign country incl. state, province)			
The new residence in Germany is the only residence      main residence      second residence					If you intend to keep your previous main residence in Germany or if you have any other residences here, please fill out the additional form "registration of several residences"			
to fill out only if you are moving from abroad: last residence in Germany (postal code, town, street/place, number)								
Pos. 1	Surname/last name			Earlier names/maiden name/name of birth			First name(s)	
2								
3								
4								
Pos. 1	Academic title	Marital status	Gender	Date of birth	Place of birth (county, state; if in a foreign country: incl. country)			
			M      F					
2			M      F					
3			M      F					
4			M      F					
Pos. 1	Nationality(ies)			Religion	Date and place of marriage/civil partnership			
2								
3								
4								
	Information about your spouse or life partner, who does not move in with you			Do you live constantly separated from your spouse or life partner?		yes      no		
	Surname/Last name			Date of birth				
	First name							
	Address (street/place, number, postal code, town,community)							
	(Postal code, town,community)							
	Identity information						For refugees/displaced persons: residence on 1st Sept. 1939 (town,country, province)	
Pos.	Description	serial number		Issuing authority	Date of issue	Date of Expiry		
1								
2								
3								
4								
Legal representative (first name, surname, academic title, date of birth, address)								
<b>Regarding your rights to protest against the transfer of private information in certain cases, please read attached application intructions.</b>								
Place, date					Applicant's signature			