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### Variabilný symbol / ID

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**FO**

POPLATOK ZA KOMUNÁLNE ODPADY

**Oznámenie vzniku poplatkovej povinnosti**

fyzickej osoby, ktorá má v meste Rožňava trvalý alebo prechodný pobyt alebo ktorá je na území mesta oprávnená užívať nehnuteľnosť na iný účel ako podnikanie

( v zmysle zákona č. 582/2004 Z.z. v znení neskorších predpisov)

# 

# Poplatník

# Priezvisko Meno Titul

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# Rodné číslo

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**Adresa trvalého pobytu:**

**Ulica a číslo Obec PSČ**

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**Adresa prechodného pobytu :**

**Ulica a číslo Obec PSČ**

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**Poštová adresa** /vypĺňa sa v prípade, ak adresa nie je totožná s adresou trvalého pobytu/

# Ulica a číslo Obec PSČ

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# Telefónne číslo

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***Počet ostatných členov domácnosti, za ktorých plní povinnosti poplatníka :***  ............

# *Identifikačné údaje týchto osôb :*

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Rodné číslo meno, priezvisko, titul

1. ............................. ............................................................

2. ............................. ............................................................

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Prílohy:

( V prípade, ak poplatník požaduje odpustenie poplatku, je povinný predložiť doklady, ktoré odpustenie odôvodňujú, napr. pracovná zmluva, potvrdenie o pobyte, overené čestné prehlásenie a pod., v súlade s platným VZN)

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Druh a adresa nehnuteľnosti, ktorú na území mesta užíva :

(vyplňuje len poplatník, ktorý v meste Rožňava nemá trvalý alebo prechodný pobyt)

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**Poplatková povinnosť vznikla dňa** : ................................

***Beriem na vedomie, že som povinný oznámiť zmeny skutočností rozhodujúcich na vyrubenie poplatku ako aj zánik poplatkovej povinnosti v priebehu zdaňovacieho obdobia do 30 dní odo dňa, keď tieto nastali.***

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V Rožňave, dňa : .................................... ..............................................

podpis poplatníka

Poznámky :

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