

DAB mrk. ASG-2023-01659
Ref. 0709 _____
Email genhusning@dabbolig.dk
Direct tel. 77 32 00 45
Date May 2025



Power of attorney for rehousing/renovation

By signing this power of attorney, you give permission that, for the purpose of rehousing, DAB and the facility management office may disclose your information as relevant for the case. This means that we have permission to:

- Process and disclose your contact information
- Process and disclose any special needs

If you wish to grant a power of attorney for this, please complete, sign and return the attached form.

You decide whether you wish to grant a power of attorney. However, please be aware that if you do not wish to grant a power of attorney to the removals company, they will not be able to contact you about the move.

POWER OF ATTORNEY (rehousing/renovation)

The power of attorney must be completed in capital letters

I, name _____, address _____, postal code _____ and city _____,

date of birth _____, hereby grant a power of attorney for DAB and the facility management office to disclose my information for rehousing (please tick):

Removals co. ☐

Date: /



DAB
Finsensvej 33
2000 Frederiksberg
Bus. Reg. No.: 55775214
Phone: 77 32 00 00
Internet: dabbolig.dk
Email: dab@dabbolig.dk

Service center:
Mon – Fri 9:30 am – 3:00 pm
Switchboard:
Mon – Thu 8:30 am – 4:00 pm
Fri 8:30 – 3:00 pm

Gladsaxe almennyttige Boligselskab VÆREBRO PARK



Signature



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«Navn»
«Adresse»
2880 Bagsværd

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