



Authorisation form Statistics Netherlands (CBS)

Survey:

CBS correspondence number:

Details company

Company:

Name: [first name, surname]

Function:

Telephone number:

Date: [day-month-year]

Details accounting Firm

Accounting firm:

Contact person: [first name, surname]

Address:

Postal Code:

Residence:

Telephone number:

Email address accounting firm:

The above-mentioned company hereby unreservedly authorises the accounting firm specified above (respectively, bookkeeping firm, administration firm, etc.) to submit the data of the above-mentioned survey to Statistics Netherlands (CBS). The above-mentioned company also grants Statistics Netherlands permission to contact the above-mentioned accounting firm to obtain statements and information for the purpose of the above-mentioned survey.

Signature:

Please send the signed form to contactcenter@cbs.nl or the following postal address:

Statistics Netherlands
CBS Contact Center
PO box 4481
6401 CZ Heerlen