

APPLICATION FOR HOUSING SUBSIDIES

Under the law of rent subsidies NR. 138/1997

NAME (SHOULD BE THE SAME NAME ACCORDING TO THE HOUSING CONTRACT)			SOCIAL SECURITY NR.	
ADDRESS	POSTCODE	COUNTY	TELEPHONE	MOBILE
MAIN ADDRESS IF DIFFERENT FROM ABOVE: (STUDENT WITH DIFFERENT LEGAL ADDRESS)			EMAIL ADDRESS	

DESCRIPTION OF THE RENTED PREMISES

LOCATION (WHAT FLOOR IN BUILDING)	SIZE IN SQUARE METERS	NUMBER OF ROOMS
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IT IS REQUESTED THAT HOUSING BENEFITS WILL BE SUBMITTED TO THE BANK ACCOUNT:

Account holder's name (if different than the applicant)			Social security no.
BANK	BRANCH No.	SORTING CODE	ACCOUNT NUMBER

EMPLOYMENT STATUS OF APPLICANT		EMPLOYMENT STATUS OF PARTNER		MATERNITY LEAVE <input type="radio"/>
EMPLOYED <input type="radio"/>	STUDENT <input type="radio"/>	EMPLOYED <input type="radio"/>	STUDENT <input type="radio"/>	APPLICANT <input type="radio"/> PARTNER <input type="radio"/>
UNEMPLOYED <input type="radio"/>	WORK FROM HOME <input type="radio"/>	UNEMPLOYED <input type="radio"/>	WORK FROM HOME <input type="radio"/>	OTHER, WHAT: _____
DISABLED <input type="radio"/>	PENSIONER <input type="radio"/>	DISABLED <input type="radio"/>	PENSIONER <input type="radio"/>	

I the undersigned hereby declare that neither I nor anyone else who lives with me in the apartment has the right to use the apartment for profit generation, such as interest rebates for relatives as the landlord, living in the same house, or who is a direct descendant, adopted child, foster child, sibling, their child or in law.

I the undersigned am requesting rent relief under the Act no. 138/1997 on subsidies. I hereby decree that all specified information is correct. I myself am obligated to notify the municipality promptly to report any changes in my personal and household circumstances, and other such factors that could affect my right to compensation and indemnification.

I am aware of the provisions of Article 17. Act on housing benefits no. 138/1997 concerning penalties for violations of the law and the obligation to refund 15% premium if I have wrongly received compensation or received too much or for too long a period.

SIGNATURE OF APPLICANT AND OTHER RESIDENTS OF THE PREMISES, INCLUDING EVERYONE UNDER 20 YEARS:

Name _____ Social security no. _____
 Name _____ Social security no. _____
 Name _____ Social security no. _____
 Name _____ Social security no. _____
 Name _____ Social security no. _____

I THE UNDERSIGNED HEREBY GRANT THE MUNICIPALITY POWER OF ATTORNEY TO OBTAIN INFORMATION ABOUT MY INCOME AND PROPERTY FOR TAX AUTHORITIES:

Name _____ Social security no. _____
 Name _____ Social security no. _____



Other information the applicant wishes to present:

Comments from the housing department regarding compensation:

ATTENTION:

THE FOLLOWING DOCUMENTATION MUST ACCOMPANY THE APPLICATION IN ORDER TO ENSURE PAYMENT:

- Original registered rental contract of a confirmed contract form.
- Copy of tax returns of all residents in the apartment. If the tax returns have been delivered electronically they can be sent by email to husak@akureyri.is.
- Withholding Statement for the current income year. Can be obtained via the tax office or www.skattur.is and email to husak@akureyri.is.
- The most recent salary statement for all residents and/or information calculating remuneration for independent work.
- Verification of school education, including for children of the applicant 20 years and older.

APPLICATION DEADLINE

Applications must be received no later than the 16th day of the first month's payment and if the application is received later rent will not be subsidies for that month. If an application is incomplete or not accompanied by the necessary documents, benefits will not payable in the following month. Then the municipality will explain to the applicant what is lacking and give him the opportunity to rectify it within two months. The right to compensation is based on the application time, and sufficient data received within the two-month period.

APPLICATION PERIOD

Application for housing benefits is for each calendar year and is valid until the end of the application. Applicants must renew their applications before January 16th so that payments do not stop.

LENGTH OF RENTAL AGREEMENT

It precludes the right to compensation if the lease is for less than six months.

TEMPORARY RENTAL AGREEMENTS

Payments of rent subsidies cease when temporary rental contract ends unless the applicant submits a new contract. If no new contract is submitted within two months from the closing date of the contract the application shall terminate.