

....., on

CLIENT

Full name.....
StreetPlace
Personal ID No.
Degree of kinship

POWER OF ATTORNEY

I hereby give the power of attorney to

.....

representing the company

.....

as my representative (Article 96. of the Civil Code) and acting on my behalf to deal with all matters related to the bringing of remains from and a funeral with the deceased

This power of attorney also authorises to handle and retrieve the death certificate and matters related to transport and burial in the cemetery in as well as to sign and receive on my behalf VAT invoices for funeral services.

DECLARATION

I declare that the death was not caused by **infectious diseases** listed in the regulations issued under the order of the Minister of Health dated 6th December 2001 on the list of infectious diseases in the case of which the statement of death requires special treatment of the remains of persons who died of these diseases - Journal of Laws No. 152 item 1742.

.....

Signature of the Client

CARCADIA

DOM POGRZEBOWY

Dariusz Kąkalec
Al. Włókniarzy 40, 97-400 Bełchatów

Data of the deceased

First and second name

Surname

Surname at birth

Date and Place of birth

Date and place of death

Cause of death

Place of residence

.....

.....

Parents' names

.....

Maiden name of Mother

Place of burial (name of the cemetery, location)

District

Address where the body is located

Number of children

Faith

Civil status

Approximate height (cm)

Approximate weight (kg)

Additional information

DETAILS OF THE PERSON AUTHORISED TO BURY THE BODY (invoice details)

First and last name.....

Residential address.....

Degree of kinship.....

Number and series of identity card.....

Issued by.....

Contact Phone No.

Bełchatów, on

CONTRACT FOR THE IMPORT OF BODY / ASHES FROM ABROAD

Contract made on....., between the company
DOM POGRZEBOWY CARCADIA Dariusz Kąkalec
with registered address in 97- 400 Bełchatów,
al. Włókniarzy 40 hereinafter referred to as the **CONTRACTOR**
and Mr. / Mrs/ Ms.

.....
Residing at
Holder of identity card series and number.....
issued by
Personal Identification Number (PESEL).....
hereinafter referred to as **the Client**

1. The CLIENT orders and the CONTRACTOR accepts for execution the order of repatriation of the body / urn with the ashes of R.I.P. of the deceased in to Poland.
2. For the service referred to in point 1. THE CLIENT undertakes to pay to the company "DOM POGRZEBOWY CARCADIA Dariusz Kąkalec" with its registered office at 97-400 Belchatow, Al. Włókniarzy 40 , the amount of..... for the transport of the body and the costs incurred by..... . On the day of signing the contract, the Client undertakes to pay a deposit in the amount of PLN
3. The price includes: coffin, preparation of documentation and obtaining the necessary permits and transportation of the body to Poland. The Client shall also pay all costs and local charges, including the costs of necessary translations of documents.
4. Payment for the service referred to in point 1-3 will be in cash / transfer within..... days.
5. In the case of cancellation of the service by the Client, the Contractor shall be entitled to the deposit paid and any costs documented by the Contractor, e.g. translations.
6. Any disputes arising from this contract shall be settled amicably by negotiation, and in the event of further dispute by the District Court with jurisdiction over the Contractor's registered office. The body in the coffin / urn with the ashes will remain in the cold room until the payment of the full amount owed to the Contractor is settled, and the Client undertakes to cover the costs of keeping.
7. The Contract has been drawn up in 2 identical copies, one for each Party.
8. The Contract sent by fax or e-mail shall be binding on both parties.
9. I agree that my personal data will be stored and processed for the purpose of repatriation of the deceased. I have been informed that in accordance with regulation (EU) 2016/679 of the European Parliament and of the council of 27 April 2016, on the protection of individuals with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation hereinafter referred to as "GDPR") I have the right to rectify, object to or delete my personal data, as well as the right to restrict the processing. The Collector of your personal data is the company "DOM POGRZEBOWY CARCADIA Dariusz Kąkalec" with its registered office at 97-400 Belchatow, Al. Włókniarzy 40.

.....
THE CONTRACTOR

.....
THE CLIENT

dn.

Upoważnienie

Ja niżej podpisany(a)

Pokrewieństwo

zamieszkały(a).....

upoważniam- pracownika firmy

Dom Pogrzebowy CARCADIA, Al. Włókniarzy 40, 97-400 Bełchatów do odebrania odpisu aktu urodzenia i aktu małżeństwa z USC.

.....
(podpis upoważniającego)

Bełchatów, dn.....

DANE OSOBY ZMARŁEJ

IMIĘ/IMIONA

NAZWISKO

NAZWISKO RODOWE.....

STAN CYWILNY.....

DATA URODZENIA.....

MIEJSCE URODZENIA.....

WYKSZTAŁCENIE.....

RODZICE OSOBY ZMARŁEJ

OJCIEC:

IMIĘ/IMIONA.....

NAZWISKO.....

NAZWISKO RODOWE.....

MATKA:

IMIĘ/IMIONA.....

NAZWISKO.....

NAZWISKO RODOWE.....

MAŁŻONEK:

IMIĘ/IMIONA.....

NAZWISKO.....

NAZWISKO RODOWE.....

PESEL.....

.....
(PODPIS UPOWAŻNIAJĄCEGO)