**OZNÁMENIE O VYKONANÍ POHREBU**

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| **ÚDAJE O ZOMRELOM:** | | | | | | |
| Meno a priezvisko: | |  | | | | |
| Adresa trvalého pobytu: | | |  | | | |
| Dátum narodenia: | |  | | Dátum úmrtia: |  | |
| Miesto úmrtia: |  | | | Dátum pochovania: | |  |

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| --- | --- |
| **OBJEDNÁVATEĽ / OBSTARÁVATEĽ POHREBU:** | |
| Meno a priezvisko: | |
| Adresa trvalého pobytu: |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ÚDAJE O POHREBNEJ SLUŽBE (PS), KTORÁ VYKONALA:** | | | | | | | | | | | | | | | | | | | | | | | |
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| **a) dopravu telesných pozostatkov:** | | | | | | | | | | | | | | | | | | | | | | | |
| Obchodné meno: | | | | | | |  | | | | | | | | | | | | | | | | |
| Meno a priezvisko zástupcu PS: | | | | | | | | | | | |  | | | | | | | | | | | |
| Adresa sídla PS: | | | | | |  | | | | | | | | | | | | | | | | | |
| Meno a priezvisko vodiča auta pohrebnej služby: | | | | | | | | | | | | | | | |  | | | | | | | |
| ŠPZ auta pohrebnej služby: | | | | | | | | |  | | | | | | | | | | | | | | |
| Auto vybavené chladiacim zariadením: | | | | | | | | | | | | | áno | |  | |  | | | | | nie |  |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| Telesné pozostatky dočasne uložené v Dome smútku Horné Srnie: | | | | | | | | | | | | | | | | | | | | | | | |
| áno | |  | | | počet dní, keď bolo chladiace zariadenie použité: | | | | | | | | | | | | | |  | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| Ak boli telesné pozostatky dočasne uložené na inom mieste, uveďte miesto a prevádzko-vateľa chladiaceho zariadenia: | | | | | | | | | | | | | | | | | | | | | | | |
| xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **b) výkopové práce, pochovávanie a úpravu hrobu po pochovaní:** | | | | | | | | | | | | | | | | | | | | | | | |
| Obchodné meno: | | | | | | |  | | | | | | | | | | | | | | | | |
| Meno a priezvisko zástupcu pohrebnej služby: | | | | | | | | | | | | | | | |  | | | | | | | |
| IČO: |  | | | | | | | | | Adresa sídla PS: | | | | |  | | | | | | | | |
| Dátum vykonávania výkopových prác: | | | | | | | | | | | | | od: |  | | | | do: | |  | | | | |
| Hĺbka hrobu: | | | |  | | | | m | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | |  | | | | | | | | | | | | | |
| Poznámky: | | | | | | | | | | | | | | | | | | | | | | | | |

V ....................................... dňa ......................

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Pečiatka pohrebnej služby

a podpis zodpovednej osoby