

Responsible service:

Billing & customer relations of the Municipality of Steinfort recette@steinfort.lu

Tel.: (+352) 39 93 13 235 (+352) 39 93 13 234

Application for a subsidy for the use of sanitary nappies

Since 1st of January 2021, a municipal subsidy for the use of sanitary nappies is granted to:

- · any applicant suffering from an alteration or loss of control of the anal or urinary sphincter apparatus (incontinence), certified by a medical certificate.
- · babies/children up to the age of 3.

ATTENTION: The application must be renewed annually. The form must be submitted by 15th of December of the year for which the grant is requested. The person(s) for whom the subsidy is requested must have lived in the municipality of Steinfort for at least one month.

Information on the applicant

| Last Name: | | | | |
|-------------------|----|-------|--|--|
| First Name: | | | | |
| No. & Street: | | | | |
| Postcode: | L- | Town: | | |
| Phone number: | | | | |
| E-mail: | | | | |
| Matricule: | | | | |
| Bank: | | | | |
| Account holder | : | | | |
| Account: IBAN | LU | | | |
| | | | | |
| Persons concerned | | | | |
| Last Name: | | | | |
| First Name: | | | | |
| Birthdate: | | | | |
| Last Name: | | | | |
| First Name: | | | | |
| Birthdate: | | | | |

Tél.: (+352) 39 93 13 1 Fax: (+352) 39 00 15 info@steinfort.lu www.steinfort.lu

| Last Name: |
|---|
| First Name: |
| Birthdate: |
| |
| Last Name: |
| First Name: |
| Birthdate: |
| The conditions for the grant are as follows: Document to be attached: Medical certificate for people suffering from incontinence This form should be returned by 15 December 2024 at the latest to Commune de Steinfort - B.P. 42 - L-8401 STEINFORT or recette@steinfort.lu. Do not hesitate to ask for additional forms or information, if necessary, by phoning 39 93 13-235. I, the undersigned, declare that the information provided on this form is accurate. |
| Place & date: Signature |
| Reserved for the Administration Date of entry: Calculation of the grant: |
| |





Formulaire en FR



Formular auf DE

| | Reserved for the Administration | | | | |
|---------------------------|---------------------------------|---------------------------------|--|--|--|
| | Date of entry: | | | | |
| Calculation of the grant: | | | | | |
| | | | | | |
| | Grant | | | | |
| | Ogranted amount (€): | | | | |
| | ○ REJECTED reason: | | | | |
| | Steinfort, | Budget line: 3/510/648100/99001 | | | |
| | | | | | |

The information collected in this application form is necessary in order to proceed with your request for the "Application for a subsidy for the use of sanitary nappies".

These personal data are subject to a computerised data treatment which is necessary in the context of your request. Only the municipality of Steinfort will have access to this information. The data you provide will be kept for the necassary period in order to fulfil the above-mentioned purposes or as long as required by law.

In accordance with the Regulation (EC) 2016/679 on the processing of personal data and on the free movement of such data, you have the right to access, rectify, erase or request the restriction of the processing of your data. You have the right to object to the processing of your personal data, the right to dereference of your data and the right to challenge a decision resulting from an automated process.

You also have the right to lodge a complaint with the National Commission for Data Protection (CNPD), if you believe that the processing of your data does not comply with the law. To exercise your rights provided by the law or to withdraw your consent to the processing of your personal information, please contact the Data Protection Officer of the municipality of Steinfort by e-mail to: dpo@steinfort.lu, or by post to:

DPO - Commune de Steinfort 4, Square Patton L-8443 Steinfort.

By filling in and returning this form, you consent to the use of your personal data for the purpose of your application for a "Application for a subsidy for the use of sanitary nappies".

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