

CONFIRMATION OF INCOME FROM EMPLOYMENT



Employer's information

Name			
Company Reg. No.		Registered office (address)	

Employee's information

Name		Surname		Title	
Date of birth					

Information on employee – applicant employment relationship

Current job title			
Commencement date of employment			
Employment is agreed for:	<input type="checkbox"/> indefinite period	<input type="checkbox"/> definite period until: _____	
Employment type:	<input type="checkbox"/> employment contract	<input type="checkbox"/> agreement to complete a job	<input type="checkbox"/> agreement to perform work
Payment of wage:	<input type="checkbox"/> in cash	<input type="checkbox"/> sent to account	
In probationary period	<input type="checkbox"/> no	<input type="checkbox"/> yes	Number of supported children: _____
In notice period:	<input type="checkbox"/> no	<input type="checkbox"/> yes	Children's ages: _____

Average net monthly income incl. any sickness benefits - Currency

in the last 3 months, i.e. from _____ to _____	
in the last 12 months, i.e. from _____ to _____	
Average net monthly travel allowances for meals/increased living costs for the last 12 months, i.e. _____ to _____	

Deductions are not / are made from work income based on the execution of a decision/agreement on deductions from wages.

Purpose of deduction		Deduction amount - Currency	
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The employer acknowledges that ČSOB Stavební spořitelna, a.s. is authorised upon the employee's consent to verify by phone the correctness of the provided data contained in this Confirmation of Income from Employment.

If the income was provided by more than one employer in the last year, only the last employer fills out this Confirmation.

This confirmation has been issued by: _____ Contact phone: _____
First name, surname, position

In _____ on _____ Stamp and signature of confirmation issuer

I hereby declare that the information provided is true and correct. I also agree that the employer will provide ČSOB Stavební spořitelna, a.s. with information about my employment and the amount of my income so that it can assess my ability to repay the loan in question.

Signature date: _____ Applicant's signature: _____