

ESTIMATE OF REMOVAL EXPENSES

(Article 9, Annex VII of Staff Regulations and Conditions of Employment of the Teaching Staff)

I. To be filled in by the staff member or contract holder	
Mr/Ms	
wishes to have his/her furniture and personal effects, an inventory of which is attached*, removed from (previous address)	
to (new address).....	
The total value, for insurance purposes, amounts to	
Lift at the place of loading can be used by the movers?	<input type="checkbox"/> YES <input type="checkbox"/> NO Floor.....
Lift at the place of unloading can be used by the movers?	<input type="checkbox"/> YES <input type="checkbox"/> NO Floor.....
Place, date	Signature
II. To be filled in by the removal company	
Place of departure	
Place of arrival	
Expected date of removal (departure and arrival)	
Volume transported in m ³ (removal company's estimate)	
Joint or individual removal (<i>delete as appropriate</i>)	
	AMOUNT (excl. VAT)/Currency
1) Costs of packing material (cardboard boxes, wrapping materials, etc.)
2) Costs of	
- Packing
- Unpacking
3) Loading and unloading costs
4) Transportation charges (incl. road toll, port charges, etc...)
5) Additional costs (e.g. pulley, elevator) excl. VAT
Total cost of removal (excl. VAT)
Amount of VAT (at rate of%)	
Total cost of removal (incl. VAT)
6) Insurance costs	
Percentage premium, incl. taxes on policy (breakages, theft, fire) %
TOTAL AMOUNT
[Bank details of the removal firm]	
Name and address of the bank:	
Account number/holder:	
IBAN:	
SWIFT CODE (bic, clearing nr, sorting code, etc):	
Place, date	Signature and stamp of removal company.....

*An inventory of furniture and personal effects to be removed must be enclosed