

Application for compensation regarding change of floor drain and/ or installation of ball valves in bathroom (maximum of 8000 SEK)

Hereby I apply for compensation regarding change of floor drain and/or installation of ball valves in the bathroom according to the attached copy of the paid invoice. The cost is specified on the invoice. Copy of wetroomcertificate/-attestation is attached.

Name:		
Address:		
Apartment number:	Phone:	
Date:		
Signature:		
Name (text):		
Bank:		
Clearing number:Account number:		
Compensation approved by the Board		
Date:		
Amount (max 8000 SEK):		-
Signature :		