MUNICIPALITY BUDVA Secretariat for social services

SUBJECT: Request for payment of monthly allowance

I kindly request the payment of monthly allowance.

Request is submitted with the following documentation:

- 1. Proof of number of household members (certificate on house association),
- 2. Proof of income level (not adequate for fulfillment of basic life needs),
- 3. Proof of inability to work (medical documentation),
- 4. Certificate of Montenegrin citizenship,
- 5. Certificate of residence in Municipality Budva,

Annotation: This request is not taxed

(name and surname of the applicant - capital letters)
(UIN)
(address of residence)
(contact telephone)
(e-mail address)
(applicant's giro account number)
(bank name)
(applicant's signature)