# Žiadosť o poskytnutie

# peňažného príspevku na kompenzáciu

(Údaje v žiadosti vyplňujete paličkovým písmom a zodpovedajúci údaj označte podľa tohto vzoru)

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| **A.** | ***Peňažný príspevok na:*** | | |
| 1. | | osobnú asistenciu |  |
| 2. | | kúpu pomôcky |  |
| 3. | | výcvik používania pomôcky |  |
| 4. | | úpravu pomôcky |  |
| 5. | | opravu pomôcky |  |
| 6. | | kúpu zdvíhacieho zariadenia |  |
| 7. | | kúpu osobného motorového vozidla |  |
| a) | | bez automatickej prevodovky |  |
| b) | | s automatickou prevodovkou |  |
| 8. | | úpravu osobného motorového vozidla |  |
| 9. | | prepravu |  |
| 10. | | úpravu bytu |  |
| 11. | | úpravu rodinného domu |  |
| 12. | | úpravu garáže |  |
| 13. | | kompenzáciu zvýšených výdavkov: |  |
| a) | | na diétne stravovanie |  |
| b) | | súvisiacich s hygienou alebo opotrebovaním šatstva, bielizne, obuvi a bytového zariadenia |  |
| c) | | súvisiacich so zabezpečením prevádzky osobného motorového vozidla |  |
| d) | | súvisiacich so starostlivosťou o psa so špeciálnym výcvikom |  |

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| **B.** | | ***Údaje o žiadateľovi*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **Priezvisko** | | | | | | | | | | | | | |  | **Meno**  Titul | | | | | | | | | | | | | | | | | | | | | | | | |  | | Rodinný stav | | | | | | | | | | | | |  | |
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|  | Deň, mesiac, rok narodenia | | | | | | | | | | **Rodné číslo** Číslo OP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Štátna príslušnosť | | | | | | | | | | | | |  | |
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|  | **Adresa trvalého pobytu** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Ulica | | |  | | | | | | | | | | | | |  | | Číslo | | | | | | |  | | | | | | | | | | |  | Telefón | | | | |  | | | | | | | | | | | | |  | |
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|  | **Adresa prechodného pobytu** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Ulica | | |  | | | | | | | | | | | | |  | | Číslo | | | | | | |  | | | | | | | | | | |  | Telefón | | | | |  | | | | | | | | | | | | |  | |
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|  | **Adresa miesta, kde sa obvykle zdržiava** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Ulica | | |  | | | | | | | | | | | | |  | | Číslo | | | | | | |  | | | | | | | | | | |  | Telefón | | | |  | | | | | | | | | | | | | |  | |
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| **C.** | | ***Údaje o zákonnom zástupcovi žiadateľa (rodič alebo súdom ustanovený opatrovník)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **Priezvisko** | | | | | | | | | | | | | |  | **Meno** Titul | | | | | | | | | | | | | | | | | | | | | | | | |  | | Rodinný stav | | | | | | | | | | | | |  | |
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|  | Deň, mesiac, rok narodenia | | | | | | | | | | **Rodné číslo** Číslo OP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Štátna príslušnosť | | | | | | | | | | | | |  | |
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|  | **Adresa trvalého pobytu** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | **Adresa prechodného pobytu** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Ulica | | |  | | | | | | | | | | | | |  | | Číslo | | | | | | |  | | | | | | | | | | |  | Telefón | | | | |  | | | | | | | | | | | | |  | |
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|  | U cudzinca typ povolenia k pobytu | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | **Adresa miesta, kde sa obvykle zdržiava** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Ulica | | |  | | | | | | | | | | | | |  | | Číslo | | | | | | |  | | | | | | | | | | |  | Telefón | | | |  | | | | | | | | | | | | | |  | |
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| **D.** | | ***Údaje o spoločne posudzovaných osobách (manžel/ka, rodič dieťaťa, dieťa) za predchádzajúci kalendárny rok*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Meno a priezvisko | | | | | | | | | Rodné číslo | | | | | | | | Rodinný stav | | | | | | Príbuzenský vzťah | | | | | | | | | Zamestnávateľ (škola)- názov, sídlo | | | | | | | | |
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| **E.** | | ***Príjmové pomery žiadateľa a ďalších spoločne posudzovaných osôb za predchádzajúci kalendárny rok*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Príjem zo závislej činnosti | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Príjem zo samostatnej zárobkovej činnosti | | | | | | | | | | | | | | | | | | | | | | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Dávky nemocenského poistenia | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Dávka v nezamestnanosti | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Dávky dôchodkového poistenia | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Dávka v hmotnej núdzi | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Rodičovský príspevok | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Peňažný príspevok na opatrovanie | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Príjmy z nájmu, prenájmu | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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|  | Výživné | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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***Poznámka:*** *O príjmových pomeroch je potrebné predložiť doklady pri podávaní žiadosti.*

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| **F.** | ***Poskytované druhy sociálnych služieb*** | | | | |
| V súčasnosti sa žiadateľovi poskytujú nasledovné druhy sociálnych služieb: | | | | | |
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| **G.** | ***Odôvodnenie žiadosti*** | | | | |
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| **H.** | | ***Poučenie žiadateľa*** | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | Lekárska posudková činnosť sa vykonáva bez prítomnosti posudzovanej fyzickej osoby. Ak fyzická osoba chce byť prítomná na posúdení jej zdravotného stavu, musí o posúdenie požiadať písomne alebo podaním žiadosti elektronickými prostriedkami podpísanej zaručeným elektronickým podpisom. | | | | | | | | | | | | | | | | | | | | | | |  |
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| **I.** | | ***Informácia pre žiadateľa*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | Úrad práce, sociálnych vecí a rodiny – IČO: 30794536 spracúva Vaše osobné údaje (vrátane osobných údajov spoločne posudzovaných osôb) v zmysle zákona č. 447/2008 Z. z. o peňažných príspevkoch na kompenzáciu ťažkého zdravotného postihnutia a o zmene a doplnení niektorých zákonov v znení neskorších predpisov a uvedené osobné údaje ďalej poskytuje orgánom verejnej moci.  V prípade akýchkoľvek nejasností, problémov, otázok, ktoré súvisia s ochranou osobných údajov sa môžete obrátiť na mailovú adresu: ochranaosobnychudajov@upsvr.gov.sk. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **J.** | | | | | ***Spôsob výplaty*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | NNa účet v banke v SR | | | | | | | | | | | | | | | | | | | | | | | | | Číslo účtu/kód banky | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |
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| V prípade neuvedenia účtu sa príspevok vyplatí/bude vyplácať v hotovosti na adresu trvalého pobytu  v SR/prechodného pobytu v SR\*. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | \*nehodiace sa prečiarknuť | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | |  | | |  | |
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| **K.** | | ***Vyhlásenie žiadateľa*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | Vyhlasujem, že všetky údaje uvedené v žiadosti sú pravdivé a som si vedomý (á) právnych následkov v prípade uvedenia nepravdivých údajov. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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