

Państwowa Inspekcja Pracy Główny Inspektorat Pracy ul. Barska 28/30 02-315 Warszawa Polska

Rzeczpospolita Polska

# A declaration of posting of a driver to the territory of the Republic of Poland from a third country

applies to a road transport operator established in a third country which, in connection to a road transport service, is temporarily posting a driver to the territory of the Republic of Poland

#### **1. Instructions for completing the document**

- 1. Complete in CAPITAL letters.
- 2. Mark selection boxes X.
- 3. Complete in **black**.
- 4. Submit the declaration in Polish or in English.

#### 2. Data of a road transport operator from a third country

Name		
Number of the relevant permit required for international road transport		
or driving form on the basis of which the transport is carried out		
		e of the transport operator or place of erator who is a natural person
Country		
City		
Street		
Building number		Flat/office number
Postcode		
Post		
	2. Contact details of a transpo	ort operator
Business telephone number		
Business email address		
	<b>3. A transport operator's corr</b> <i>different from above</i> )	espondence address (to be completed if

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Country		
City		
Street		
Building number	Flat/office number	
Postcode		
Post		

### 3. Data of a posted driver to the territory of the Republic of Poland from a third country

Name	
Surname	
Driving licence number	
Start date of the employment contract	
	or a document equivalent to such a contract or other contract under which a driver posted to the territory of the Republic of Poland from a third country performs road transport services for that carrier
Law applicable to the employment contract	
	1. Address of residence of a posted driver
Country	
City	
Street	
Building number	Flat/office number
Postcode	
Post	
	2. Data concerning posting of a driver to the territory of the Republic of Poland from a third country
The envisaged beginning date of the posting of a driver	
The envisaged end date of the posting of a driver	
Registration number of the vehicle used for transport operations by the posted driver	

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Information whether the transport services provided are:	Carriage of goods	Carriage of passengers
	International carriage	Cabotage operations
	① Mark selection boxes with "X".	

#### 4. Data of a contact person

Name		
Surname		
	1. Address of residence of a c	contact person
Country		
City		
Street		
Building number		Flat/office number
Postcode		
Post		
Business telephone number		
Business email address		
	2. Correspondence address (t	o be completed if different from above)
Country		
City		
Street		
Building number		Flat/office number
Postcode		
Post		

# 5. Data of a person authorised to represent a road transport operator from a third country posting a driver to the territory of the Republic of Poland in matters concerning the conditions of employment

Name	
Surname	

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	1 Address of residence of a person authorised to represent a road transport operator
Country	
City	
Street	
Building number	Flat/office number
Postcode	
Post	
Business telephone number	
Business email address	
	2. Correspondence address (to be completed if different from above)
Country	<b>2. Correspondence address</b> (to be completed if different from above)
Country City	2. Correspondence address (to be completed if different from above)
	2. Correspondence address (to be completed if different from above)
City	2. Correspondence address (to be completed if different from above)
City Street	
City Street Building number	
City Street Building number Postcode	Flat/office number

Name		
Surname		
City		
Street		
Sileet		
Building number	Flat/office number	
Postcode		
Post		

7. Legal basis

A declaration of posting of a driver to the territory of the Republic of Poland from a third country Further information can be found at: <a href="https://www.biznes.gov.pl/posting-of-workers">www.biznes.gov.pl/posting-of-workers</a>

Artice 12 (1) and (3) of the Act on the posting of drivers in road transport.

## 8. Attachments

Document of power of attorney, if a proxy has been appointed.
Indicate the number of attachments.

2. Proof of payment for granting the power of attorney, if a proxy has been appointed.

#### 9. Data of a person submitting the declaration

Name	
Surname	
City	
Date	

<sup>(</sup>i) Date in format: DD-MM-YYYY