



Fortunato

name and surname

residence/ mailing address

PESEL (Social Security Number)

contact number

place, date

FORTUNATO S.A.
ul. Tęczowa 29
53-601 Wrocław

DEBT ASSUMPTION REQUEST

I, the undersigned, holder of personal identification number _____,
social security _____, residing _____

I declare that I undertake to accept responsibility for the liabilities of the debtor _____
_____ to the Creditor _____

ensuing from _____ and I undertake to repay
total debt jointly and severally with the debtor as follows*:

- in a one-off payment, before _____.
- in monthly installments of PLN _____ before the _____
day of each month, starting from _____.

I declare that I consent to the processing of my personal data in accordance

with the Act of 29 August 1997 on the protection of personal data (Journal of Laws of 2002, No 101, item
926) by Fortunato SA, to the extent required to perform the necessary steps with regard to the above case.

Legible signature