**BALVU NOVADA SOCIĀLAJAI PĀRVALDEI**

Iesniedzējs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personas kods: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faktiskā dzīvesvietas adrese: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telefons: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IESNIEGUMS**

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***Pabalstu pārskaitīt uz kontu Kredītiestāde\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

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| **Konta Nr.** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

***Pabalstu pārskaitīt pakalpojuma sniedzējam\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Esmu informēts/a, ka:***

1. Esmu informēts, ka personas dati tiks apstrādāti Balvu novada pašvaldības noteiktā mērķa īstenošanai: sociālo pakalpojumu un sociālās palīdzības sniegšanai.

Personas datu pārzinis ir Balvu novada pašvaldība. Adrese: Bērzpils iela 1A, Balvi, Balvu novads, LV-4501, reģistrācijas Nr.90009115622, Tālr. 64522453, epasts: dome@balvi.lv.

Personas datus apstrādās Balvu novada Sociālā pārvalde, juridiskā adrese Raiņa iela 52, Balvi, Balvu novads, LV-4501, tālrunis 64521998, elektroniskā pasta adrese: [socparvalde@balvi.lv](mailto:socparvalde@balvi.lv).

1. ***pamatojoties uz Sociālo pakalpojumu un sociālās palīdzības likuma 39.1 pantu,*** *Pašvaldības Sociālā pārvalde pieņem lēmumu par nepamatoti izmaksāto sociālās palīdzības pabalstu atgūšanu, ja tas konstatē, ka attiecīgais pabalsts ir nepamatoti izmaksāts klienta vainas dēļ, klientam sniedzot nepatiesu vai nepilnīgu informāciju vai nepaziņojot par pārmaiņām, kas varētu ietekmēt tiesības uz šo pabalstu vai tā apmēru. Lēmumu izpilda tiesu izpildītājs* [*Administratīvā procesa likumā*](http://www.likumi.lv/doc.php?id=55567) *noteiktajā kārtībā, pamatojoties uz pašvaldības Sociālās pārvaldes izpildrīkojumu*.

**Lūdzu izvēlēties vienu vēlamo lēmuma saņemšanas veidu:**

Lēmumu vēlos saņemt pa pastu uz iesniegumā norādīto dzīvesvietas adresi.

Lēmumu vēlos saņemt personīgi - Balvu novada Sociālajā pārvaldē, pārvaldes teritoriālajā centrā/vai pagasta pārvaldē pie sociālā darbinieka.

2022.gada \_\_\_.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Iesniedzēja paraksts:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Iesniegumu pieņēma:**

2022.gada \_\_\_.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sociālā darba speciālists: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(paraksts)

Balvu novada

SOCIĀLĀ PĀRVALDE

Datums \_\_\_\_\_\_. \_\_\_\_\_\_ . 20\_\_\_.

Nr. SD/20\_\_/2.1.-2.1/ /IE

Balvu novada pašvaldības SOCIĀLAIS DIENESTS

Datums \_\_\_\_\_ . \_\_\_\_\_\_ . 2020.

Indekss SD/2020/2.1.-\_\_\_\_\_\_\_\_IE

Balvu novada pašvaldības SOCIĀLAIS DIENESTS

Datums \_\_\_\_\_ . \_\_\_\_\_\_ . 2020.

Indekss SD/2020/2.1.-\_\_\_\_\_\_\_\_IE

Balvu novada pašvaldības SOCIĀLAIS DIENESTS

Datums \_\_\_\_\_ . \_\_\_\_\_\_ . 2020.

Indekss SD/2020/2.1.-\_\_\_\_\_\_\_\_IE

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**Lēmums**

**Lēmuma Nr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Datums: \_\_\_\_.\_\_\_\_.\_\_\_\_\_\_\_.**

EUR \_\_\_\_\_\_\_\_\_\_ pārskaitīt uz kontu

**Pārskaitīt pakalpojuma sniedzējam:**

EUR \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EUR \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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EUR \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(atlikums, euro)