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| **This form has to be sent to the Personnel Department by the responsible contact person of MEYER WERFT (**[**sonntagsarbeit@meyerwerft.de**](mailto:sonntagsarbeit@meyerwerft.de)**).**  **For the approval of work on Sundays and holidays it is necessary to send this form by mail at the latest until Wednesday, 23:59!**  **Contact in the Personnel Dept.:**  **Karin Wilkens: Tel.: +49 (0)4961 81 4412**  **In Representation Viviane Hartwig: Tel.: +49 (0)4961 81 7247** | | | | | **Contractor** | | **Supplier No.** | **Order** | | | | | |
| **Number** | | **Year** | | **Account** | |
| Enter Contractor | | Enter Supplier-No. | Enter Order Number | | Enter Order Year | | Enter Order Account | |
| **Contact/Site Manager MEYER WERFT** | | **Surname, First Name:** Enter Name of MW Contact | | | | | | |
| **Phone:** Enter Phone Number of MW Contact | | | | | | |
| **E-Mail:** Enter Email-Address of MW Contact | | | | | | |
| **The registration for the work on Sundays and holidays can take place for the next three Sundays. If you need more than the specified lines, simply add them.** | | | | | | | | | | | | | |
| **Sunday/Holiday I, Date:** Select Date **\*the compensation day for work on Sunday must be taken within 14 days; for work on holidays within 8 weeks** | | | | | | | | | | | | | |
| **No.** | **Surname** | **Name** | **Day Pass** | **Long-term ID Registration No.** | | **Reason for work on Sunday** | | | **Working time** | | **Duration of break** | | **Compensation day for work on Sunday and/or holiday\*** |
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| **Sunday/Holiday II, Date:** Select Date **\*the compensation day for work on Sunday must be taken within 14 days; for work on holidays within 8 weeks** | | | | | | | | |
| **No.** | **Surname** | **Name** | **Day Pass** | **Long-term ID Registration No.** | **Reason for work on Sunday** | **Working time** | **Duration of break** | **Compensation day for work on Sunday and/or holiday\*** |
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| **Sunday/Holiday III, Date:** Select Date **\*the compensation day for work on Sunday must be taken within 14 days; for work on holidays within 8 weeks** | | | | | | | | |
| **No.** | **Surname** | **Name** | **Day Pass** | **Long-term ID Registration No.** | **Reason for work on Sunday** | **Working time** | **Duration of break** | **Compensation day for work on Sunday and/or holiday\*** |
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