

No. 39890

**Denmark
and
Yugoslavia**

Agreement between the Government of the Kingdom of Denmark and the Government of the Federal Republic of Yugoslavia on the return and readmission of persons who do not or no longer fulfil the conditions for entry or residence in the territory of the other State (with protocol and annexes). Copenhagen, 29 May 2002

Entry into force: *8 March 2003 by notification, in accordance with article 17*

Authentic texts: *Danish, English and Serbian*

Registration with the Secretariat of the United Nations: *Denmark, 29 January 2004*

**Danemark
et
Yougoslavie**

Accord entre le Gouvernement du Royaume du Danemark et le Gouvernement de la République fédérale de Yougoslavie relatif au retour et à la réadmission des personnes qui n'ont pas ou ne remplissent plus les conditions pour l'entrée ou la résidence dans le territoire de l'autre État (avec protocole et annexes). Copenhagen, 29 mai 2002

Entrée en vigueur : *8 mars 2003 par notification, conformément à l'article 17*

Textes authentiques : *danois, anglais et serbe*

Enregistrement auprès du Secrétariat des Nations Unies : *Danemark, 29 janvier 2004*

[ENGLISH TEXT – TEXTE ANGLAIS]

Annex 1

(space reserved for photograph)

.....
.....
(name and address of the competent authority)

Telephone: Fax:
No.:
Date:

.....
.....
(name and address of the competent requested authority)

SUBJECT: REQUEST FOR READMISSION

.....
(surname and name of the person to be returned)

I

It is hereby requested that the person, who is validly assumed to fall within the readmission obligation in accordance with Article 2 of the Agreement, be readmitted to the territory of

For that purpose the following information is forwarded:

1. Personal data

- surname and name
- date of birth.....
- place, municipality and country of birth
- last place of residence in the state of the Requested Party

2. Other data available (for example: the name of the father and mother, earlier surname, pseudonym, nickname etc.):

.....
.....

3. Available documents (original or copy) are enclosed for proof of identity and citizenship:

.....
.....

II

It is requested that the following children under 18 who are assumed to fall within the readmission obligation in accordance with Article 2 of the Agreement, be readmitted to the territory oftogether with one of the parents for whom this request has been submitted*.

Surname and name	Relationship	Date, month, year and place of birth
1		
2		
3		
4		
5		

Following excerpts from the Register of Births are enclosed:

1
2
3
4
5

L.S.

.....
(Signature of the representative of
the competent authority)

* For children born in the territory of the Requesting Party and for children born on the territory of a third State, it is necessary to submit an excerpt from the Register of Births on an international form.

Annex 2

.....
.....
(name and address of the competent authority)

Telephone: Fax:
No.:
Date:

.....
.....
(name and address of the competent authority of the Requesting Party)

SUBJECT: REPLY TO THE REQUEST FOR READMISSION

Re: Your request no..... of

In regard to your Request for Readmission of
(surname and name)

born in
(date, month and year of birth) (place, municipality and country of birth)

the procedure has been completed and it has been established that there exists a readmission obligation concerning the mentioned person, in accordance with Article 2 of the Agreement. The said person shall therefore be issued a travel document for the purpose of his/her return to

In case of a negative reply an explanation shall be given

.....
.....
(Information confirming the non-existence of readmission obligation in accordance with Article 2 of the Agreement shall be stated)

L.S.

.....
(Signature of the representative of the competent authority)

Annex 3

.....

 (name and address of the competent authority)

Telephone: Fax:
 No.:
 Date:

.....

 (name and address of the competent authority,
 who shall readmit the person returning)

SUBJECT: NOTIFICATION ON THE RETURN

I

Please be notified that on the on the international border crossing point
 (date, month and year)

the below described person will be returned to.....

from airport....., flight number, departing at, arriving at
 (time)

airport.....at.....
 (time)

serial number	surname and name	date and place of birth	number and date of the Reply to the Request
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.....
.....

II

Data concerning persons needing special help or care due to illness or age:

serial number	surname and name	reason
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.....
.....
.....

L.S.

.....
 (Signature of the representative of the competent authority)