



Kriminalomsorgen  
Bergen fengsel

## APPLICATION FOR VISITORS PERMIT

To be filled in by the applicant, use block letters.

The undersigned hereby applies for permission to visit \_\_\_\_\_ who is an inmate of \_\_\_\_\_ prison in the Prison and Probation Service west region.

Visitor's name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_

City: \_\_\_\_\_

Social security number - 11 digits: \_\_\_\_\_

Telephone work / mobile: \_\_\_\_\_

Relationship with prisoner  
(Family / friend / other): \_\_\_\_\_

E-mail address: \_\_\_\_\_

As an applicant, I am aware that the prison will check my record with the police and that a professional assessment is made by the police authority and prison before any visitation permit is granted.

**Visitors under the age of 18 can only come with an adult.** If the visit takes place with an adult who is not the guardian, written permission from the guardian or guardian must be submitted. The permit must contain a name, address, telephone number and birth date.

If prisoners do not have the opportunity to receive a visit, cf. legal restrictions, or do not want visits, you will not receive any feedback. The prison has a duty of confidentiality about who is in prison and therefore does not have the opportunity to answer questions about whether the application is being processed. If the application is approved, a response will be received within approximately 14 days.

I have familiarized myself with the rules for visiting prisons.

Place / date: \_\_\_\_\_ signature: \_\_\_\_\_

The completed application should be sent to the inmates' prison:

Bergen Fengsel

Address: Kriminalomsorgens dokumentssenter  
PO Box 694,  
4302 Sandnes

The permit can also be sent by e-mail to: [kriminalomsorgens.dokumentssenter@kriminalomsorg.no](mailto:kriminalomsorgens.dokumentssenter@kriminalomsorg.no)