

SUPPLIER CARD

PROJECT TITLE

Technical project manager

First and last name

--

Structure of membership

--

Address

--

e-mail

--

phone number

--

fax

--

Registration with the Intellectual Property Consultants Association ☐ NO ☐ YES

if Yes N.

--

date

--

Number of days spent by the supplier at the facility beneficiary

--

Supplier's data ¹

Name of the supplier

--

Tax/fiscal code of the supplier

--

The undersigned

--

born in

--

date

--

in his capacity as legal representative of the

--

situated

--

street

--

postcode

--

aware of the criminal responsibilities provided for by art. 76 of the DPR n. 445 of 28/12/2000 (Italian State Law) in case of false declarations, pursuant to and for the purposes of art. 47 of the aforementioned DPR n. 445/2000 (Italian State Law)

DECLARES that

-not be the owner, manager/administrator, partner or employee of the beneficiary's company/enterprise

1 Fill in a form for each supplier. Please note that the supplier must meet the requirements listed in the catalogue. If the person is a natural person, please indicate his or her full name

- not be married or related to the holder, or to the partners or manager/administrator of the beneficiary’s company/enterprise
- its company is not, even partially, owned by the beneficiary’s shareholders or directors/administrators
- its company is not, even partially, owned by spouse or relatives of beneficiary’s shareholders or directors/administrators
- not to be a domestic or foreign partner and not to be part of the same group with respect to the beneficiary’s company/enterprise
- it is not controlled and related or controlling to the beneficiary’s company/enterprise

and the list of partners and participations is detailed below

Name/denomination	percentage of capital participation

Experience gained in similar projects

No. of years referred to in the attached list

Experience gained in competing projects

No. of years

General experience gained

No. of years

Project title similar and brief description	duration of project		Project cost	Customer name (at least 3 customers must be entered)	Tax/fiscal code	Site *
	From	to				

* for Site please indicate **R** if regional (Tuscany Region), **N** if national (Italian) and **I** if EU and non-EU

List of equipment and software you plan to use for the project

Type of equipment	Technical specifications

List of titles, certifications, qualification

Description	Issued by	On

List of staff employed for the project

Name	Tax/fiscal code	Titles	Experience
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Description of the activated expert, if any

First and last name

Tax/fiscal code

Experience gained in similar projects

Experience gained in competing projects

General experience gained

No. of years

No. of years

No. of years

referred to in the attached list

Project title similar and brief description	duration of project		Project cost	Customer name (at least 3 customers must be entered)	Tax/fiscal code	Site *
	from	to				

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List of equipment and software you plan to use for the project

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List of titles, certifications, qualification

Description	Issued by	On
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declares having read and signed the information notice pursuant to Art. 13 of Legislative Decree no. 196 of 30 June 2003. no. 196 Personal Data Protection Code (Italian State Law) and having acquired the declaration of consent pursuant to Art. 13 of Legislative Decree no. 196 of 30 June 2003 (Italian State Law), Personal Data Protection Code, from the listed customers. The request to acquire the authorisation to process personal data from the supplier and the supplier's three customers concerns only and exclusively sole proprietorships and natural persons.²

Digital Signature³

Firma Revisore per presa visione del presente documento_____

² This declaration must be signed by the beneficiary enterprise, the supplier and the supplier's customer included in the self-certified list. It is not obligatory to enclose this declaration but it must be retained by the company and made available for inspection.

³ This must be signed digitally signed