

STATEMENT

Company name.....
 Address (headquarters).....
, Postal code Phone.....
 Fax E-mail.....
 Company registration date.....
 Registration number at the Trade Register Office.....
 Fiscal identification code.....
 AOC number.....
 Undersigned,, identified with ID card
 series no....., issued by on.....
, domiciled in....., street.....
 no....., building....., entrance....., apart....., sector/county.....
, position....., acting as legal representative of the
 company, declare:
 We have not received any other State aid granted in accordance with the provisions of the
 specific sections of the various sections of the Commission Communication on the Temporary
 Framework for State aid Measures to Support the Economy in the context of the current COVID-
 19 pandemic;
 We have benefited from other State aid granted in accordance with the provisions of the
 specific sections of the various sections of the Commission Communication on the Temporary
 Framework for State aid Measures to Support the Economy in the context of the current COVID-
 19 pandemic totaling EUR.
 We have not received any other aid granted in accordance with section 3.1 of the Commission
 Communication on the Temporary Framework for State aid Measures to Support the Economy in
 the context of the current COVID-19 pandemic;
 We have received other aid in accordance with section 3.1 of the Commission Communication
 on the Temporary Framework for State aid Measures to Support the Economy in the Current
 COVID-19 pandemic and the total support received is EUR.
 We have not received *de minimis* aid or other aid falling within the scope of Commission
 Regulation 651/2014 of June 17, 2014 declaring certain categories of aid compatible with the
 internal market pursuant to Articles 107 and 108 of the Treaty.
 We have benefited from *de minimis* aid/aid falling within the scope of the *de minimis* rules or
 aid falling within the scope of Commission Regulation 651/2014 of June 17, 2014 declaring
 certain categories of aid compatible with the internal market in application of Articles 107 and
 108 of the Treaty.
 I declare under my own responsibility that all the information provided and recorded in this
 application is correct and complete.
 I understand that any omission or incorrectness in the presentation of information in order to
 obtain pecuniary benefits is punishable by law.
 Name and surname.....
 Position,
 Authorized signature of the applicant,
 Signing date.....