

**ANNEX A**

**FACSIMILE  
ADMISSION REQUEST**

**SUBJECT: Application for admission to the procedure for selecting the implementing body for the programme of information and promotion of agricultural products on the third-country market: JAPAN**

The undersigned \_\_\_\_\_  
Born in \_\_\_\_\_ on \_\_\_\_\_  
resident in a Street / Square \_\_\_\_\_ in the Municipality of \_\_\_\_\_  
Cap. \_\_\_\_\_ Province \_\_\_\_\_ State \_\_\_\_\_  
as legal representative of the economic operator \_\_\_\_\_,  
with registered office in via / Piazza \_\_\_\_\_, in the Municipality of \_\_\_\_\_,  
Cap \_\_\_\_\_, Province \_\_\_\_\_, State \_\_\_\_\_,  
Tax Code no. \_\_\_\_\_, VAT number. n. \_\_\_\_\_.  
PEC \_\_\_\_\_ Telephone \_\_\_\_\_

*(in the case of a temporary grouping not yet established, indicate all the economic operators who are members, specifying who will play the role of leader / agent and the parts of the service attributed to each)*

**ASKS / ASK TO PARTICIPATE**

to the procedure indicated in the subject and for this purpose present:

- the declarations required according to the model set out in Annex B to the specifications, completed and signed by the legal representative of the investee / s operator / s;
- the identity document of the subscriber (s);
- the declaration by the Banking Institute that it possesses the financial means necessary to guarantee the execution of the actions provided for in the Program (suitable bank references);
- the certificate or registration in the Chamber of Commerce in the Member State where the economic operator is based;
- CV or CVs of the operator (s) interested in participating (company CV)
- Copy of the latest approved financial statements and / or VAT return

The undersigned person (s) declares that they do not accept that all communications by the Consorzio per la tutela del formaggio pecorino romano inherent to the procedure indicated in the object take place by PEC at the address indicated.

\_\_\_\_\_ there, \_\_\_\_\_

Name of economic operator 1  
(Lead representative)

\_\_\_\_\_

Name and Surname of the subscriber

\_\_\_\_\_

(legible signature)

**SU CARTA INTESTATA DELL'OPERATORE ECONOMICO PARTECIPANTE**

Name of economic operator 2  
(Lead representative)

\_\_\_\_\_

Name and Surname of the subscriber

\_\_\_\_\_

(legible signature)

(N.B. in the event of a temporary grouping not yet established, all members must sign the application)



**REASONS FOR EXCLUSION**

**A: REASONS RELATED TO CRIMINAL CONVICTIONS**

<b>Reasons related to criminal convictions pursuant to Article 57, paragraph 1, of Directive 2014/24 / EU</b>	
The economic operator, or a person who is a member of board of directors, management or supervisory authority or who has powers of representation, decision or control, has been sentenced by a final judgment, given no more than five years ago or after which an exclusion period established directly in the sentence for the following offenses is still applicable?	
a) participation in a criminal organization <sup>1</sup>	a) <input type="checkbox"/> Yes <input type="checkbox"/> No
b) corruption <sup>2</sup>	b) <input type="checkbox"/> Yes <input type="checkbox"/> No
c) fraud <sup>3</sup>	c) <input type="checkbox"/> Yes <input type="checkbox"/> No
d) terrorist crimes or offenses related to terrorist activities <sup>4</sup>	d) <input type="checkbox"/> Sì <input type="checkbox"/> No
e) money laundering or terrorist financing <sup>5</sup>	e) <input type="checkbox"/> Yes <input type="checkbox"/> No
f) child labour and other forms of human trafficking <sup>6</sup>	f) <input type="checkbox"/> Yes <input type="checkbox"/> No

**B: REASONS FOR PAYMENT OF TAXES OR SUPPLEMENTARY CONTRIBUTIONS**

<b>Reasons related to the payment of taxes or social security contributions pursuant to Article 57, paragraph 2 of Directive 2014/24 / EU</b>	
<b>Payment of taxes</b> Has the economic operator breached tax payment obligations, whether in the country where it is established or in the Member State of the contracting authority or the contracting entity, if different from the country of establishment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Payment of social security contributions</b> Has the economic operator violated obligations relating to the payment of social security contributions, whether in the country where it is established or in the Member State of the contracting authority or the contracting entity, if different from the country of establishment?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<sup>(1)</sup> As defined in Article 2 of the Council Framework Decision 2008/841 / JHA of 24 October 2008 on the fight against organized crime (OJ L 300, 11.11.2008, p. 42)

<sup>(2)</sup> As defined in Article 3 of the Convention on the fight against corruption involving officials of the European Communities or of the Member States of the European Union (OJ C 195, 25.6.1997, p. 1) and in Article 2, paragraph 1, of the Council Framework Decision 2003/568 / JHA of 22 July 2003 on combating corruption in the private sector (OJ L 192, 31.7.2003, p. 54). This exclusion ground includes corruption as defined in the national law of the contracting authority (or entity) or the economic operator.

<sup>(3)</sup> Pursuant to Article 1 of the Convention relating to the protection of the financial interests of the European Communities (OJ C 316, 27.11.1995, p. 48).

<sup>(4)</sup> As defined in Articles 1 and 3 of the Council Framework Decision of 13 June 2002 on the fight against terrorism (OJ L 164, 22.6.2002, p. 3). This ground for exclusion also includes instigation, concurrence, attempt to commit one of these offenses, as indicated in Article 4 of that framework decision.

<sup>(5)</sup> As defined in Article 1 of Directive 2005/60 / EC of the European Parliament and of the Council of 26 October 2005 on the prevention of the use of the financial system for the purpose of money laundering and terrorist financing (OJ L 309 of 25.11.2005, p. 15).

<sup>(6)</sup> As defined in Article 2 of Directive 2011/36 / EU of the European Parliament and of the Council of 5 April 2011 on the prevention and suppression of trafficking in human beings and the protection of victims, and replacing the Council Framework Decision 2002/629 / JHA (OJ L 101, 15.4.2011, p. 1).

**C: REASONS RELATED TO INSOLVENCY, CONFLICT OF INTEREST OR PROFESSIONAL OFFENSES<sup>7</sup>**

<b>Information on any situations of insolvency, conflict of interest or professional crimes</b>	
Has the economic operator violated, as far as it is aware of, applicable obligations concerning health and safety in the workplace, environmental, social and labor law <sup>8</sup> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the economic operator in one of the following situations or is he subjected to a procedure for ascertaining one of the following situations?  a) bankruptcy b) liquidation c) insolvency d) preliminary agreement with creditors	a) <input type="checkbox"/> Yes <input type="checkbox"/> No b) <input type="checkbox"/> Yes <input type="checkbox"/> No c) <input type="checkbox"/> Yes <input type="checkbox"/> No d) <input type="checkbox"/> Yes <input type="checkbox"/> No
Has the economic operator been <b>guilty of serious professional misconduct</b> <sup>9</sup> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is <b>the economic operator aware of any conflict of interest</b> <sup>10</sup> related to its participation in the procurement procedure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Has the economic operator or a company connected to it advised the contracting authority</b> or the contracting entity or has it participated in the preparation of the award procedure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
The economic operator can confirm: a) not to have been seriously guilty of false declarations in providing the information required to verify the absence of reasons for exclusion or the respect of the selection criteria, b) not to have hidden this information?	<input type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Yes <input type="checkbox"/> No

**SELECTION CRITERIA**

**Global indication for all selection criteria**

<b>Regarding the selection criteria, declare that:</b>	
Meets the selection criteria required	<input type="checkbox"/> Yes <input type="checkbox"/> No

**A: ELIGIBILITY**

Entry in a commercial register kept in the Member State where the economic operator is established	[.....]
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<sup>(7)</sup> See Article 57 (4) of Directive 2014/24 / EU.

<sup>(8)</sup> As established for the purposes of this contract by national legislation, by the relevant notice or announcement or by the tender documents or by Article 18, paragraph 2, of Directive 2014/24 / EU.

<sup>(9)</sup> See, where applicable, national law, relevant notice or procurement or procurement documents.

<sup>(10)</sup> As indicated in national law, in the relevant notice or tender or in the tender documents and in the annotated model grant agreement (H2020 AGA): V2.1.1 - 1 July 2016 Standard general grant agreement, [http://ec.europa.eu/research/participants/data/ref/h2020/grants\\_manual/amga/h2020-amga\\_en.pdf](http://ec.europa.eu/research/participants/data/ref/h2020/grants_manual/amga/h2020-amga_en.pdf) p. 240

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**B: ECONOMIC AND FINANCIAL CAPACITY**

<p>The economic operator declares to have achieved, in the five-year period 2017 -2018-2019-2020-2021, a total global turnover of not less than Euro 2.000.000,00 in letters: (Euro two million/00) net of VAT, resulting from VAT or tax declarations equivalent within the EU;</p> <p>The economic operator attaches a declaration by the Banking Institute held by the Economic Operator of the financial means necessary to guarantee the execution of the actions envisaged by the Program (suitable bank references).</p> <p>The economic operator shall attach the certificate or registration in the Chamber of Commerce in the Member State where the economic operator is established.</p>	<p>[ <input type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No</p> <p>[ <input type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No</p> <p>[ <input type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No</p>
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**C: TECHNICAL CAPACITY**

<p>The economic operator declares to have carried out similar services in the five-year period 2017- 2018-2019-2020-2021 to those object of the tender for a total amount not less than Euro 1.500.000 (in letters: Euro One million five hundreds thousand /00) net of VAT, as per the following table.</p> <p>The operator declares to make available for the execution of the service a working group with proven experience in services similar to those covered by the tender, as can be seen from the CVs</p>	<p>[ <input type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No</p> <p>[ <input type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No</p>
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<b>Similar services</b>			
Short description of the service performed	Client body Contract authority	Implemenation years	Amount invoiced in the <del>2018-2019-2020- 2021-2022</del> <b>2017-2018- 2019-2020-2021</b> five- year period

<b>Working group</b>			
Name and Surname	Role within the work group	Activities that will be carried out in execution of the service	Main qualifying experiences

**SU CARTA INTESTATA DELL'OPERATORE ECONOMICO PARTECIPANTE**


**SUBCONTRACTING**

<p>The economic operator declares that it wishes to make use of the subcontract in accordance with art. 105 of Legislative Decree 50/2016.</p> <p>To this end it indicates the parts of the service that it intends to subcontract and the relative percentage share (maximum 30% of the contract amount).</p>	<p>[ <input type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No</p> <p>_____</p> <p>_____</p>
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**Final declarations**

The undersigned formally declares that the information provided in this document is true and correct and that the undersigned is aware of the consequences of a serious misrepresentation, pursuant to article 76 of Presidential Decree 445 / 2000.

The undersigned formally declares to be able to produce, upon request and without delay, the certificates and other forms of documentary evidence of the case

Date, place and, if requested or necessary, sign: [.....]

(in case of temporary grouping or consortium each member must produce the above statements)

ATTACH PHOTOCOPY OF IDENTITY CARD OF THE SUBSCRIBER