

SELF – DECLARATION FORM

Company name
address
Phone number, Fax number
E-mail
Company registration date.....
The company registration number at the Trade Registry Office
Fiscal identification code.....
Air Operator Certificate No. (AOC)

I, the undersigned.....
Identified with ID card: serial no., issued by
..... as of, residing in
....., street.....
....., no., building no.
area/county....., position....., as legal representative of the
..... company, I declare:

- We have not received any other state aids 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 outbreak;
- We have benefited from other State aid granted in accordance with 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 outbreak amounting EUR.
- We have not received any other aid granted under 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 outbreak;
- We have received other aid under 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 Outbreak and the total support received is in the amount of EUR.
- We have not received minimis aid or other aid covered by Regulation 651/2014 of the Commission of 17 June 2014 declaring certain categories of aid compatible with the common market in application of Articles 107 and 108 of the Treaty.
- We have benefited from minimis aid or other aid covered by Regulation 651/2014 of the Commission of 17 June 2014 declaring certain categories of aid compatible with the common market in application of Articles 107 and 108 of the Treaty.

I hereby certify that all the information provided and recorded in this application is correct and complete.

I understand that any omission or inaccuracy in the information in order to obtain pecuniary advantages is punishable by law.

Name and surname

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