To:

Fondazione Regionale

Per la Ricerca Biomedica

Via Taramelli, 12

20124 Milano

Italy

**DECLARATION FOR PARTNERS NOT ELIGIBLE FOR FUNDING**

The undersigned *(name, surname)*………………………………………………………………………………….

born in *(place of birth, Country)………………………………………………………………………………………*

on *(date of birth)……………………*, residing at (*address: street, number)..................................................*

*………………………………………………………………………………………………………………………………*

postcode ……………………….City ………………………………………………………………………………….

as legal representative of the *(name of the entity)*………………………………………………………………..

based in *(Country)………………………*, at *(address: street, number, postcode, city)……………………..*

*………………………………………………………………………………………………………………………………*

VAT registration number if any: ……………………………………………………………………………………….

**DECLARES**

pursuant to and in accordance with the provisions of Article 76 of the Italian Presidential Decree no. 445 of 2000 and subsequent modifications, to participate to the project entitled…………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………………… as partner not eligible for funding.

During the implementation of the above project, the following activities will be performed (full description in section “*V: Partners with own fundings*” of the informatics platform):

- …………………………………….

- …………………………………….

Place and date,

DIGITAL SIGNATURE OF THE LEGAL REPRESENTATIVE