

DECLARATION OF THE APPLICANT

TRAVEL GRANT (BIN BF01) FUND FOR BILATERAL RELATIONS, SLOVAKIA

BUSINESS DEVELOPMENT, INNOVATION AND SMES PROGRAMME 2014-2021

I hereby declare, that

- I am authorized to sign this Declaration on behalf of the applicant;
- the applicant who has elaborated this Travel Grant Application, will be the beneficiary and will not act as a mediator only;
- any documents required to be submitted prior to the conclusion of the Agreement shall be submitted and will be submitted accurately, correctly and without changing any of the data;
- the applicant's assets is not subject to bankruptcy or restructuring proceedings, bankruptcy proceedings have not been closed due to lack of assets (Act No. 7/2005 Coll. on bankruptcy and restructuring and on amendments to certain laws);
- the applicant is not an undertaking which is subject to an outstanding recovery order following a previous Commission decision declaring an aid illegal and incompatible with the internal market;
- the applicant has not been lawfully convicted under Act No. 91/2016 Coll. on Criminal Liability of Legal Entities and on Amendments to Certain Acts;
- the applicant is not an undertaking in difficulty within the meaning of point 20 of Communication from the Commission - Guidelines on State aid for rescuing and restructuring non-financial undertakings in difficulty (2014/C 249 /01);
- The applicant:
 - do not have tax liabilities (Act No. 563/2009 Coll. on Tax Administration (Tax Code) and on amendments to certain acts);
 - do not have health insurance, social insurance and retirement savings liabilities (Act No. 580/2004 Coll. Act on Health Insurance and on amendment and amendment of Act No. 95/2002 Coll. on insurance and on amendments to certain laws; Act No. 461/2003 Coll. on social insurance; Act No. 43/2004 Coll. on old-age pension savings and on amendments to certain laws);
 - must not violate the illegal prohibition employment under a special regulation (Act No. 82/2005 Coll. on illegal work and illegal work employment as amended) during 5 years

I am aware that in case of violation of these declarations, the travel grant may not be granted and the Programme Operator is entitled to request the entire amount of the travel grant provided.

In case of approval of the Travel Grant Application, I am aware of the Program Operator's right to publish information regarding the name and address of the organization, the name of the initiative, the travel grant amount and other relevant data.

By submitting the Travel Grant Application, I consent that I have read the Privacy Statement listed in Annex 9 to Bilateral Fund Guide.

By submitting this Declaration I consent to all of the above mentioned.

Name of statutory representative:

Signature and date: