**Applicant’s Statement**

1. By applying to this Call, the applicant hereby confirms that he/she represents an SME in line with the Article 2 of Annex 1 of the Commission Regulation (EU) No 651/2014 of 17 June 2014.
2. By applying to this Call, the applicant hereby confirms that he/she is not entrepreneur in difficulty (according to the point 14 of the Commission Regulation (EU) No 651/2014 of 17 June 2014.
3. By applying to this call, the applicant hereby accepts their responsibility on accuracy and veracity of data and documents submitted, and all conditions and obligations stated in the Call;
4. By applying to this call, the applicant declares that the proposed project activities did not start before the submission of the present application and that they are not funded by another either national or European fund;
5. By Applying to this call, the applicant declares that there is not in a situation of conflict of interest with RESTART MED! Responsible Project Partner, and/or the members of the Local Evaluation Board
6. By applying to this call, the applicant gives its permission to RESTART MED! project partners to process the data given only for management and statistic purposes (including publishing of general information) even through digital devices with respect of the security and privacy within the law. Data processing by RESTART MED! Project Partners will be made in accordance with the provisions of Regulation (EU) 2016/679 and the subsequent transposing laws (jointly, the ‘’GDPR’’).

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| **FINANCIAL UNDERTAKING: The Beneficiary declares that the company is in one of the following situations:**  | **Insert YES or NO as Appropriate**  |
| a) it is bankrupt, subject to insolvency or winding up procedures, its assets are being administered by a liquidator or by a court, it is in an arrangement with creditors, its business activities are suspended or it is in any analogous situation arising from a similar procedure provided for under national legislation or regulations;  |   |
| b) it is in breach of its obligations relating to the payment of taxes or social security contributions in accordance with the law of the country in which it is established, or those of the country of the performance of the contract.  |   |

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|  **Legal representative of the organization**  |   |
| **Position**  |   |
| **Signature**  | *(electronic signature if possible, or a scanned signed copy)*  |
| **Date**  | *(valid date after Call publication and before closing)*  |