**To the Italian Trade Agency (ITA)**

**New York Office**

**33 East 67th Street**

**New York, NY 10065**

**Email:** **newyork@ice.it**

**Application form for expression of interest/selection of economic operators to be invited to tender for amounts below the European community threshold, to be carried out pursuant to:**

* **art. 36, paragraph 2, letter b) of Legislative Decree 50/2016, and subsequent amendments and additions;**
* **art. 11 of Ministerial Decree no. 192 of 2 November 2017;**

**for “A THREE-YEAR (2020-2022) INSURANCE BROKERAGE SERVICE”.**

The undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (title) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and legal representative of (company) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with registered office in (full address)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Federal tax ID no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as the person proposing this expression of interest, aware of the criminal liability that may be faced in the event of false statements, and

**HAVING NOTED**

all the conditions and terms of participation established in Notice no. **00211064/19** published on the website of the Italian Trade Agency office in New York on the 26th of February 2019,

**I EXPRESS**

the interest in participating in the tender indicated above and

**I DECLARE**

* that the above-mentioned applicant meets the requirements for participation in the above tender;
* to accept that any communication relating to the procedure in question is sent to the following company e-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;
* to be informed, pursuant to and for the purposes under the Article 13 of the EU Regulation 679/2016, that the data collected in this form and in the attached documentation will be processed, including electronically, exclusively in the context of the procedure for which this statement is made.

Signature of declarant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_