

**ITALIAN TRADE AGENCY (ITA)- NEW YORK OFFICE
CERTIFICATE OF GOOD STANDING FOR VENDORS REGISTERED
AND AWARDED A CONTRACT WITH ITA**

The undersigned _____, with office at _____, City _____, ZIP _____, Tel. _____, e-mail _____, (hereinafter the "**Company**"), under penalty of perjury under the Law of the United States and the Italian Law (Legislative Decree 50/2016 and its subsequent amendments and Ministerial Decree no. 192 of 2 November 2017;) **DECLARES THAT:**

- It has *applied* and obtained *registration* with ITA vendors' database;
- It has *participated* to a bid and has been *awarded* a contract for providing goods and/or performing services (or is currently providing goods/services) – **(if applicable)**;
- It possesses the *license, permit and/or authorization in good standing* and they have not been revoked and/or suspended. In this respect, it attaches the following documents:

- It possesses *insurance coverage* (general liability coverage, worker compensation and that required by the law), and named ITA as an additional insured. Since the award and contract inception, it never lost proper insurance coverage and never revoked ITA as an additional insured;
- It has never been *condemned* in any court of law and is not aware of any criminal federal or state *investigation* against it even for tax purposes, nor is aware of any ongoing investigation after the contract award. Company never had a complaint filed by any enforcement agency (or tax authority) and have not engaged in any conduct that would give rise to sanctions and/or conviction under international, federal, state or local laws;
- It is in *compliance* with all laws, statutes, and regulations applicable to the services/goods provided hereunder and it is not in *bankruptcy* or similar proceedings;
- It possesses the skills and experience to provide the service/goods to ITA.
- Its *N.A.I.C.S.* (North American Industry Classification System) Number is: _____ For more info: <https://www.census.gov/eos/www/naics/index.html>
- **Company agrees to comply with the requirements stated in Legislative Decree 50/2016 and Ministerial Decree no. 192 of 2 November 2017;**
- By signing this statement, it shall communicate any *relevant change* in its status to ICE and hereby provides *irrevocable consent* to authorize ITA to a *background check*, to verify all information provided from the authorities that issued the documents the Company
- submitted and/or with the support of third-party providers.



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ICE

Company shall indemnify ITA, its members, managers, directors, officers, employees, agents and insurers and hold each of them harmless from any and all suits, claims, demands, liabilities, damages, and expenses arising out, and/or in any way connected to a violation of US law and/or Italian law indicated above and caused by Company.

Company

furthermore declares that all the information provided, and the accompanying documents are true and correct to the best of its knowledge and belief.

Date _____ Company name _____

Print name and position _____

e-mail _____ tel _____

Authorized Signature _____