INFORMATION FORM

Concerning European Community (EC) Contractors And EC Contracts To Benefit From The Value Added Tax Exemption Stipulated In IPA II Framework Agreement That Found Eligible For Ratification Through Approved By The Law No: 6647

|  |  |
| --- | --- |
| NAME/TITLE OF THE CONTRACTING AUTHORITY |  |
| **UNION CONTRACTOR (***NAME/TITLE****)*** |  |
| DATE AND NUMBER OF THE FINANCING AGREEMENT |  |
| **BENEFICIARY (***NAME/TITLE****)*** |  |
| **UNION CONTRACT’S** |
| *Date-Number* |  |
| Place/Venue of Implementation |  |
| ***Amount*** |  |
| ***Start and End Date*** |  |
| *Duration* |  |
| *Sign Type* | *Wet Signed* |  **X** | *E-Signed* |  |
| *Name of the Project* |  |
| UNION CONTRACTOR’S |
| ***Tax Number***  |  |
| ***Tax Office(If Any)*** |  |
| ***Contact Informations****(Address, Phone, Fax, E- mail)* |   |
| *Accuracy of the information above is approved***UNION CONTRACTOR***(Name, Title, Signature, Stamp, Date)* | *Accuracy of the information above is approved***CONTRACTING AUTHORITY***(Name, Title, Signature, Stamp, Date)* |