**Annex 3**

**European Economic Area Financial Mechanism**

**2014-2021**

**MINISTRY OF ENERGY**

**RENEWABLE ENERGY, ENERGY EFFCIENCY, ENERGY SECURITY PROGRAMME**

**TRAVEL SUPPORT SCHEME**

**WITHIN THE FUND FOR BILATERAL RELATIONS**

**DECLARATION OF APPLICANT’S ELIGIBILITY**

I, the undersigned ................................................................................................... (*full name*), in my capacity as……………........................................................................................... ............. in / of ….........................................................................................................................................,

UIC ......................................................(or another identification number for foreign applicants),

**in connection with a Request for Support under the Travel Support Scheme under the Renewable Energy, Energy Efficiency and Energy Security Programme within the Fund for Bilateral Relations,**

**declare the following:**

**1. The legal entity ………………………………………………………..., represented by me,**

1.1. is/ is not (*the incorrect is crossed out or deleted*) an undertaking in difficulty /the definition of 'undertaking in difficulty' is described in Art. 2, para. 18 of Commission Regulation (EU) No: 651/2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty/;

1.2. has / has not (*the incorrect is crossed out or deleted*) declared bankruptcy, is/ is not (*the incorrect is crossed out or deleted*) in insolvency proceedings; is / is not (*the incorrect is crossed out or deleted*) in a liquidation procedure; is/ is not (*the incorrect is crossed out or deleted*) in a similar situation arising from a similar procedure under its national legislation;

1.3. has/ does not have any (*the incorrect is crossed out or deleted*) liabilities for taxes and mandatory social security contributions within the meaning of Art. 162, para. 2, it. 1 of the Tax and Social Insurance Procedure Code and the respective interests under such liabilities to the state, proved by a valid act of a competent authority, except when the amount of unpaid due taxes or social security contributions is up to 1 percent of the amount of the annual budget for the last year, but not more than BGN 50 000;

1.4. has/ does not have any (*the incorrect is crossed out or deleted*) violations ascertained by an effective criminal ruling or a court decision under Art. 61, para. 1, Art. 62, para. 1 or 3, Art. 63, para. 1 or 2, Art. 118, Art. 128, Art. 228, para. 3, Art. 245 and Art. 301 - 305 of the Labour Code or Art. 13, para. 1 of the Labour Migration and Labour Mobility Act;

1.5. has/ does not have any (*the incorrect is crossed out or deleted*) unfulfilled orders of the European Commission for reimbursement of unlawful and incompatible state aid it has been granted;

1.6. all documents submitted with the Request for Support on behalf of the legal entity …………………………………………………………………….., represented by me, are true.

**2.** **I have not been convicted / I have been convicted** (*the incorrect is crossed out or deleted*) with an effective sentence for a crime under Art. 108a, Art. 159a – 159d, Art. 172, Art. 192a, Art. 194 - 217, Art. 219 - 252, Art. 253 - 260, Art. 301 - 307, Art. 321, 321a and Art. 352 - 353f of the Criminal Code or for a crime, similar to those listed, in another Member State or a third country (*applicable for an Applicant from the Republic of Bulgaria)*;

2. **I have not been convicted / I have been convicted** (*the incorrect is crossed out or deleted*) with an effective sentence for fraud, corruption, involvement in a criminal organization or any other illegal activity detrimental to financial interests without evidence that corrective measures have been taken in recent years *(applicable to an Applicant who is not from the Republic of Bulgaria);*

(The inapplicable item 2 deleted.)

3. I, as a Representative of …………………, **have no conflict of interests** that cannot be resolved.

**I am aware of the criminal liability under Art. 313 of the Criminal Code for declaring false circumstances.**  
Date of declaration:

……………………………….  
  
 Declarer:

/signature/