**Form no. 3**

**PERSONAL STATEMENT**

**Concerning the E.C. Decisions for the recovery of a state aid**

Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

Company address:

With the seat in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, on St. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, no.\_\_\_\_\_\_\_, tel.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, fax.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_, Trade Register’s Reg. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_, Tax ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Unique Identifier at a European Level (EUID) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, no. of European Air Operator Certificate (AOC) \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I, the undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, identified with ID Card series \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, no. \_\_\_\_\_\_\_\_, released by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, with the domicile in the locality of \_\_\_\_\_\_\_\_\_\_, county \_\_\_\_\_\_\_\_\_, on St. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, no.\_\_\_\_\_\_\_, block \_\_\_\_\_\_, apt. \_\_\_\_\_\_, entrance \_\_\_\_\_\_, position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as the legal representative of company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby state that:

 No decisions of the European Committee concerning the recovery of a state aid from the company which I represent were issued;

 Decisions of the European Committee concerning the recovery of a state aid from the company which I represent which were not executed have been issued;

 Decisions of the European Committee concerning the recovery of a state aid from the company which I represent have been issued and these were executed according to the legal provisions in effect\*;

\*Observation: the statement will mention the decision/ decisions of the European Committee and their fulfilment will be proved according to the case.

I hereby declare at my own risk that all the information provided and registered within this present statement are correct and complete.

I understand that any omission or inaccuracy in presenting these information for the purpose of obtaining pecuniary advantages are punished according to the law.

Surname and first name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Petitioner’s authorised signature

Date when signed

\_\_\_\_\_\_\_\_\_\_