







Project number:	B_A.1.2_0012_ARTOLIO
Project title:	ARTOLIO
Applicant:	Prefilled by the partner

DE-MINIMIS DECLARATION (TO BE FILLED-IN BY THE RECIPIENT OF THE AID)

I, the undersigned, as the authorised representative	e of the organisation listed bel	ow, hereby certify that:				
The organisation I represent has not received any aid falling under one of the <i>de minimis</i> Regulations during the current fiscal year and the previous two fiscal years.						
The organisation I represent has received aid falling under one of the <i>de minimis</i> Regulations during the current fiscal year and the previous two fiscal years:						
Organisation, provider of aid, contact info	Country of organisation providing aid	Legal name and registration number of aid receiver	Amount of aid	Date of granting aid		
De minimis under 1407/2013 (general aid)						
1.						
2.						
	N/A					
De minimis under 1408/2013 (agriculture)						
1.						
2.						
	N/A					
De minimis under 717/2014 (fishery and aquaculture)						
1.						
2.						
	Total fishery and aqua	aculture de minimis aid received:		N/A		







ARTOLIO

De minimis aid to be received within the **B_A.1.2_0012_ARTOLIO** in the ARTOLIO:

Beneficiary, provider of aid	Country of the beneficiary providing aid	Contact info of the beneficiary providing aid	Type of de minimis aid (general, agriculture or fishery/aquaculture)	Amount of aid	Date of granting aid
Prefilled by the	Prefilled by the	Prefilled by the partner	Prefilled by the partner	Prefilled by the partner	Prefilled by the partner
partner	partner				

On behalf of the organisation, I hereby confirm that information in this declaration is accurate and true and I take full responsibility for it.

Official title of the organisation in English	
Official title of the organisation in national language	
Legal status in English	
Legal address	
Registration number	
Name of the authorised representative	
Position	
Signature	
Date of signature	