

APPLICATION FORM FOR PARTICIPATION IN THE PROCEDURE RECEIVING TAX RELIEFS FOR COMPANIES AND ENTREPRENEURS WHO PERFORM BUSINESS IN BUSINESS ZONES : "NEDAKUSI", "CEROVO", "VRANEŠKA DOLINA", "BISTRičKA DOLINA", RAKONJE-RAVNA RIJEKA " AND " RIBAREVINE-PODA "

Applicant - investor:

(Name and headquarters of business entity / name, surname and address of the entrepreneur)

The application is submitted for receiving tax reliefs for realization of an investment project in a business zone:

(Name and place of realization of the investment project)

I. WRITTEN DECLARATION ON ACCEPTANCE OF TERMS AND CONDITIONS FOR TAX RELIEFS APPLICATION

Applicant – investor :

Responsible person of the applicant – investor :

Applicant for participation in receiving tax reliefs procedure (further : Application) hereby declares that he accepts conditions and requirements prescribed by the Decision on reliefs for companies and entrepreneurs doing business within business zones "Nedakusi", "Cerovo", "Vraneška dolina" and "Bistrička dolina" (Official gazette MNE- Municipal regulations No. 28/15).

In this regard, the investor undertakes to enclose with the application following evidences:

- Evidence that it is registered in the Central Register of Business Entities (hereinafter CRPS);
- Evidence that no bankruptcy or liquidation proceedings have been initiated against business entity, except for reorganization in accordance with the law governing bankruptcy of business entities;
- Evidence that he/she was not convicted for a criminal offense committed in the performance of an economic activity;
- Evidence that he has settled all duties on taxes, customs and contributions;
- Evidence that number of employees has not been reduced by 10% or more in previous 12 months before submitting the Application ;
- Evidence that he was not granted funds for the same purposes from the budget of Montenegro ;
- Evidence that in a business entity, the state or local self-government does not have a majority stake in ownership;
- Evidence that it is not in difficulty in accordance with the state aid regulations;
- Evidence that it is not obliged to refund unlawfully received state aid;
- An Investment project and a Business plan.

Place and date:

M,P

Signature of the authorized person:

II GENERAL INFORMATION ON THE INVESTOR

Table 1

Name of business entity	
Form of organization	
Year of establishment	
Activity and activity code	
Headquarters (address)	
Registration number / PIB	
Telephone, fax and e-mail address	
Internet address	
Contact person	
Position / function of the contact person	
Phone and e-mail of contact person	
Number of full-time employees in year in which the Application is submitted	
Planned number of permanent employees / number of unoccupied jobs based on investment or expansion	

Table 2

Business building where the investment or expansion of the economic activity is carried out: name and location	
Business area (m2)	

Table 3

The most important products, works and / or services	

III. INVESTMENT PROJECT INFORMATION

Value of the investment project: _____ € (in letters: _____ euro)

Name of the Business zone in which the investment project is realized: _____

Sector (activity) in which the investment project is realized: _____

Closer information about project _____

Deadline for implementation of the investment project and achieving full employment foreseen by the Investment project:

The total number of new jobs for an indefinite period of time, the opening of which will be a business entity to be bound by the contract on the use of financial facilities: _____

I declare under full criminal and material responsibility that data given in the Application are true and correct.

Place and date:

M.P.

Authorized signature:

Bijelo Polje, _____ year
