

OP/EUI/HRS/2020/001

**OPEN CALL FOR TENDER FOR THE SELECTION OF A MEDICAL CENTRE AND MEDICAL SERVICES
FOR THE EUROPEAN UNIVERSITY INSTITUTE**

SELF-CERTIFICATION FORM

The undersigned _____

Born on (date) _____ at (place) _____

Province _____ tax identification code _____

in his/her function as _____ representing the following legal person:

full official name:

official legal form:

full official address:

In submitting its offer for the tender procedure, fully accepting all liabilities inherent in this Declaration, including the awareness that false statements will incur the penalties envisaged by the existing applicable legislation,

Declares:

(the declaration is done by checking the relevant boxes and, where required, completing the statements, writing clearly; in the event that the space provided is not sufficient, further documentation may be attached to this form, on condition that there is clear identification on this form of which documents are attached to it)

(the two following statements are alternative; check the applicable one)

1) that the Tenderer is registered in the Company Register administered by its local branch of the Chamber of Commerce, Industry, Arts and Crafts, and Agriculture (attach extract from the Chamber's Registry):

Chamber branch: _____

registration number _____ registration date _____

name _____

Italian tax ID code _____ VAT number _____

Current legal status _____

Legally established in _____ Province of _____

Tenderer name: _____

Annex II C - Self-certification form

Street Address _____ no. _____ C.A.P. _____
 memorandum of Association dated _____ company duration _____

or

- that the Tenderer is under no obligation to register with the Chamber of Commerce, Industry, Arts and Crafts, and Agriculture (*in this case, attach to this Declaration a copy of the company's Memorandum of Association and its By-laws*);
- 2)** that the Tenderer and all the experts/practitioners proposed possess all the legal requirements in order to carry out the medical activities specified in this call for tender (please provide evidences of the necessary registration in the national register "Albo dei Medici").
- 3)** that the Tenderer's registration numbers as a contributor to national social security and insurance agencies are:

INPS	Agency	Branch	Registration n.	
		Branch	Registration n.	
		Branch	Registration n.	

INAIL	Agency	Branch	Registration n.	
		Branch	Registration n.	
		Branch	Registration n.	

List below any further registration numbers as contributors with other national insurance or social security entities:

- 4)** that the Tenderer accepts, without reservation, all the rules and provisions laid out in the Invitation Letter and in the Tender Specifications, including all the annexes.
- 5)** that there are no impediments to the Tenderer's participation in public procurement tenders, and further that the Company has not been barred from entering into contracts with the Public Administration pursuant to Article 5.1 of the Tender Specifications.
- 6)** that, in drawing up the Offer, it has taken note of all obligations incumbent upon it in relation to safety in the workplace provisions, and has accurately evaluated the specific risks that the performance of the contract will entail.
- 7)** that it has taken note of all general, particular and local circumstances, barring none, and of all other elements which may directly or indirectly influence the performance of the service or the calculations made in drawing up the Offer submitted with its bid; and it further declares that the Offer submitted is profitable; and that it undertakes to hold said Offer valid and binding for one-hundred-and-eighty (180) days, starting from the deadline for submission of its bid.

- 8)** that the tenderer satisfies the requirements settled under “Chapter 2 - Description of services required” and “Chapter 5 - Exclusion, Selection criteria and awarding criteria” of the Tender Specifications (please provide with evidences).
- 9)** that each expert/practitioner has submitted his/her own cv (preferable Europass format).
- 10)** that a criminal record certificates has been submitted for each expert/practitioner involved in the service.
- 11)** that it is in possession of two (2) bank references (one for freelancers) from prime banks and/or financial companies included in the registers of authorized brokers, issued after the date of the Invitation to Tender and the publication of these Tender Specifications, proving that the Tenderer has always met its obligations punctually and regularly, and that the Medical Centre possesses the economic and financial capacity to perform the services that are the object of this tender.

Whether the company can provide only one (1) bank reference, it is necessary for its Legal Representative to submit an appropriate explanation on this matter.

- 12)** that it is aware and fully in acceptance of the fact that any and all incorrect or incomplete information deliberately provided, within the context of this tender procedure, may lead to it being excluded from this and any other tender procedure managed and financed by the European University Institute;
- 13)** that it authorizes the European University Institute to use the following current account in the event that it is awarded the tender.

Name of the bank:	
Complete address of the bank branch:	
Exact name of account holder:	
Full number of current account, including banking codes:	
IBAN:	

- 14)** that it authorizes the European University Institute to use the following contacts and addresses for any and all correspondence relating to the tender procedure (clarifications, requests for additional information, communications relating to award of tender and contract signing process, etc.):

Tel _____

E-mail address _____

PEC address _____

- 15)** that the following is a list including the company owner and/or technical director (in the case of individual ownership companies), or the company shareholders and/or technical directors (for all other types of companies)¹:

Name e Surname					
Born in		Province		Date	
Tax ID code					
Role in company					

Name e Surname					
Born in		Province		Date	
Tax ID code					
Role in company					

(the two following statements are alternative; check the applicable one)

- 16)** that no person has resigned or been removed from any of the Tenderer's official functions, as listed at point 2 above, on any of the grounds foreseen in Article 5.1 of the Tender Specifications, in the year prior to the date of the launch of this tender procedure;

or

- That the following persons resigned or were removed from their official functions with the company, as listed in point 2 above, on any of the grounds foreseen in Article 5.1 of the Tender Specifications, in the year prior to the date of the launch of this tender procedure:

Name	
Surname	
Official function	
Date of resignation/removal	

Name	
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¹ List all current **technical directors, shareholders** (only for partnerships), **owners** (only for individual ownership firms), **directors with powers of representation, general partners** (only for limited partnerships), **sole shareholder as a natural person, or majority shareholder** (only in the case of joint stock companies with fewer than four shareholders) and **all those who**, regardless of their formal title and office, but based on the actual powers conferred upon them, in practice **manage the company's affairs** and are therefore in a position to influence, through their actions, the reliability of the company as a whole (e.g., executives, proxy holders, etc.).

Tenderer name: _____

Annex II C - Self-certification form

Surname	
Official function	
Date of resignation/removal	

- 17) that the Medical Centre has _____ (number) employees on its payroll;
- 18) that the Medical Centre has submitted at least 8 CVs composed of (at least): 3 medical advisers, 1 paediatrician, 1 occupational doctor, 2 psychiatrists and 1 service manager.
- 19) that it is in compliance with all obligations related to the payment of social security and insurance contributions on behalf of its employees, pursuant to the existing legislations.

Place and date _____

Signature of Legal Representative _____

A non-authenticated photocopy of the valid ID document of the signatory is enclosed.