

ANNEX 2

SWORN STATEMENT/AFFIDAVIT

(Art. 47 Presidential Decree 28 December 2000, n. 445 which concerns the Italian legislation and regulations regarding administrative documents)

I, the undersigned

SURNAME _____ NAME _____
(women have to indicate their maiden name)

TAX CODE _____ BORN IN _____ PROVINCE _____

ON _____ RESIDING IN _____ PROVINCE _____

ADDRESS _____

POSTAL CODE _____ TELEPHONE _____

Aware that false declarations are punished in accordance with the Criminal Code and special laws to this regard, according to the clauses referred to in article 76 of the Presidential decree n. 445 of 28 December 2000:

DECLARE

Place and date

Signature*

(legible signature)

* In case of a sworn statement/affidavit, if the declaration is signed in absence of an employee in charge of receiving these documents, a copy of a valid identity document must be attached (article 38 Presidential Decree n. 445 of 28 December 2000).

The Undersigned is aware that the data above are handled in compliance with the Legislative Decree 196/2003 "Code regarding the protection of personal data".