|  |
| --- |
| **LOGO OF THE APPLICANT** |

**ADMINISTRATIVE IDENTIFICATION FORM**

|  |  |
| --- | --- |
| **NAME OF THE APPLICANT:** |  |

|  |  |
| --- | --- |
| **LEGAL STATUS:** |  |

|  |  |
| --- | --- |
| **MAIN REGISTRATION NUMBER (if applicable)** |  |

|  |  |
| --- | --- |
| **VAT NUMBER (if applicable)** |  |

|  |  |
| --- | --- |
| **NAME, SURNAME AND FUNCTION OF THE LEGAL REPRESENTATIVE OF THE APPLICANT:** |  |

|  |  |
| --- | --- |
| **ADDRESS:** |  |

|  |  |
| --- | --- |
| **ZIP CODE, TOWN:** |  |

|  |  |
| --- | --- |
| **PHONE:** |  |

|  |  |
| --- | --- |
| **MOBILE PHONE:** |  |

|  |  |
| --- | --- |
| **E-MAIL ADDRESS:** |  |

|  |  |
| --- | --- |
| **WEBSITE ADDRESS: (if applicable)** |  |

|  |  |
| --- | --- |
| **SOCIAL MEDIA ACCOUNT/S: (if applicable)** |  |

\_\_\_\_\_\_\_\_\_\_, \_\_\_.\_\_\_.202\_.

(Place and date)

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

(Name and Surname of Authorised Representative,

Signature and Stamp)