

DECLARATION CONFIRMING PARTNER'S INTEREST IN A BILATERAL MEETING AND COOPERATION WITHIN THE CULTURE PROGRAMME

EEA GRANTS 2014-2021

(TO BE COMPLETED AND CONFIRMED BY THE DONOR STATE PARTNER IN
 ENGLISH)

IDENTIFICATION AND CONTACT DATA OF THE PARTNER	
Name	
Legal form	
Account number (IBAN, SWIFT)	
Registered address	Street and number
	Postal code
	City
	State (Norway, Iceland, Liechtenstein)
Contact person	Name and surname
	E-mail
Brief characteristics of the partner and the possibilities of its involvement in the project	<i>Please, briefly describe your organisation and your anticipated role in the project.</i>

DECLARATION (IN CASE OF BILATERAL MEETING IN A DONOR STATE):

On behalf of the partner, (name of the partner institution):.....

I hereby confirm that I am ready and wish to participate in a bilateral meeting with representatives from (name of the Czech institution):.....

.....

in (country – Iceland, Liechtenstein or Norway):.....

to negotiate partner cooperation in a project planned within the Culture programme.

OR

DECLARATION (IN CASE OF BILATERAL MEETING IN THE CZECH REPUBLIC):

On behalf of the partner, (name of the partner institution):.....

I hereby confirm that I am ready and wish to participate in a bilateral meeting with representatives from (name of the Czech institution):.....

.....
 in the Czech Republic to negotiate partner cooperation for the project planned within the Culture programme.

I acknowledge that the costs of our representatives (max. 2 persons) will be paid by our organisation and the respective amount will be subsequently reimbursed to us from the applicant’s account on a flat-rate basis:

- the **amount of daily costs of alimentation, accommodation, local transport and pocket money for one person** (representative of the donor state partner) is **230 EUR** for a bilateral meeting in the Czech Republic. These costs are applicable to a maximum of two persons for up to two days;
- **the amount of costs of international transport and insurance for one person** (representative of the donor state partner) is **700 EUR** for a trip from Iceland, **500 EUR** for a trip from Norway and **250 EUR** for a trip from Liechtenstein (total costs of travel from the donor state to the Czech Republic and back). Applicable to a maximum of two persons.

I acknowledge that any costs exceeding the above-specified flat rate amounts will be covered from our own resources.

Name and surname (Statutory or authorised ¹ representative of the Partner)	Date	Signature
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¹ If signed by a representative authorised by a power of attorney, such power of attorney must be included as an **annex**.

Iceland 
Liechtenstein 
Norway grants 

	<i>DD.MM.YYYY</i>	
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