

Economic Operator

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(name, tax registration code, address)

STATEMENT
On avoiding conflict of interest

I, the undersigned, as the legal representative of, with the registered office located at, registered at the Trade Registry under no., Tax Identification Code (CUI), fiscal attribute, according to the certificate attached to the offer, regarding the procurement procedure, organized by the beneficiary, financed through under the project, hereby declare, on my own responsibility, under the sanction of false declarations as stipulated in Article 326 of Law No. 286/2009 on the Criminal Code and Article 18¹ of Law No. 78/2000 on the prevention, detection, and sanctioning of corruption offenses, with subsequent amendments and completions, the following:

- I undertake that during the implementation period and the sustainability period associated with the contract/decision/order/financing agreement for the above-mentioned project, I will not hire individuals who are spouses, relatives, or in-laws up to and including the second degree, nor will I contract legal entities that were involved in the verification/evaluation process of the financing applications within the selection procedure and/or in the process of monitoring/verifying/approving/payment/reimbursement related to the contract/decision/order/financing agreement for the above-mentioned project. In this regard, I commit to requesting a declaration on their own responsibility from each individual I intend to hire and to verifying the list of legal entities that were involved in the verification/evaluation process of the financing applications within the selection procedure and/or in the process of monitoring/verifying/approving/payment/reimbursement related to the contract/decision/order/financing agreement for the above-mentioned project.
- I commit to taking all necessary measures to avoid situations that could lead to a conflict of interest and confirm that neither as of the date of this statement nor within the 12 calendar months prior to this date do I know of any situations in which:
 - there are/were any spouse relationships, family ties, or in-laws up to and including the second degree between the shareholders/administrators of the organization acting as the beneficiary and the shareholders/administrators of the economic operators acting as the bidder/subcontractor/associate/third-party supporter,
 - there are/were any spouse relationships, family ties, or in-laws up to and including the second degree between members of various committees or other responsible persons of the private beneficiary and the bidders/subcontractors/associates/third-party supporters,
 - there are/were situations in which, at the level of the bidder/subcontractors/associates/third-party supporters or their administrators, there are natural or legal persons, autonomous or related, who individually or jointly hold more than 25% of the shares or social parts in two or

more economic operators that have submitted separate bids in the current procurement procedure as bidders/subcontractors/associates/third-party supporters,

- there are/were situations in which the private beneficiary and one of the bidders/subcontractors/associates/third-party supporters have common beneficial owners, including spouses or beneficial owners with family ties or in-laws up to and including the second degree,
- gifts have been given/received or other forms of hospitality have been offered/accepted that exceed what would be considered customary/modest and, as a result, could be deemed an incentive.

I, the undersigned, declare that I will immediately notify the beneficiary if any changes occur in this statement and will take measures to resolve the conflict of interest as soon as possible.

I also declare that the information provided is complete and correct in every detail, and I understand that the beneficiary and public authorities have the right to request any additional information for the purpose of verifying and confirming this statement.

I understand that, if this declaration is not accurate, I may be liable for violating the provisions of the criminal legislation regarding false statements.

Date of completion:

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(name and position of the authorized person)

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(signature of the authorized person)

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