

ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

RNDr. Martin Benko, PhD.

representing,

Slovak hydro meteorological institute (SHMI)

official legal status or form: Public body

official registration No: 00 156 884

full official address: Jeséniova 17, 833 15 Bratislava, Slovak Republic

VAT number: 2020749852

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie Ľ. Štúra 1, 812 35. Bratislava, Slovak Republic

VAT Number: 2023106679

represented by **Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection**

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to

provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).
2. The associated beneficiary will contribute **345 008 EUR** to the project.
My organisation will participate in the implementation of the following actions: D.1.
The estimated total cost of my organisation's part in the implementation of the project is **820 000 EUR**.
3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.
4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At BRATISLAVA on 09-08-2019

Signature of the Associated Beneficiary:

Slovenský
hydrometeorologický ústav
P.O.BOX 15
Jeséniova 17, 833 15 Bratislava
(5)



Name(s) and status/function of signatory:

RNDr. Martin Benko, PhD., Director General

ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

Mr. Ján Lunter

representing,

Banská Bystrica Self-governing Region (BBSK)

official legal status or form: regional public body

official registration No: 37 828 100

full official address: Námestie SNP 23, 974 01 Banská Bystrica, Slovak Republic

VAT number: 202 162 7333

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie Ľ. Štúra 1, 812 35, Bratislava, Slovak Republic

VAT number: 2023106679

represented by Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).

2. The associated beneficiary will contribute **43 200 EUR** to the project.

My organisation will participate in the implementation of the following actions: C1.1, E and F.

The estimated total cost of my organisation's part in the implementation of the project is **432 000 EUR**.

3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.

4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Banská Bystrica on 12.07.2019

Signature of the Associated Beneficiary:

Name(s) and status/function of signatory:

[Redacted signature]

Ing. Jan Lunter

Chairman of the Banská Bystrica Self-governing Region



ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

Ing. Rastislav Trnka

representing,

Košice Self-governing Region (KSR)

official legal status or form: regional public body

official registration No: 35541016

full official address: Námestie Maratónu mieru 1, 042 66 Košice, Slovak Republic

VAT number: 202 162 4924

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie L. Štúra 1, 812 35, Bratislava, Slovak Republic

VAT number: 202 310 6679

represented by Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).

2. The associated beneficiary will contribute **43 200 EUR** to the project.

My organisation will participate in the implementation of the following actions: C1.1, E and F.

The estimated total cost of my organisation's part in the implementation of the project is **432 000 EUR**.

3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.

4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Košice on 16. 7. 2019

Signature of the Associated Beneficiary:

Name(s) and status/function of signatory:



Ing. Rastislav Trnka

Chairman of the Košice Self-governing Region

ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

Robert MISKUF

representing,

PEDAL Consulting, s.r.o. (PEDAL)

Official legal status or form: **Limited Liability Company**

Official registration No: **46 986 111**

Full official address: **Bjornsonova 4807/5, 03601, Martin, Slovakia**

VAT number: **SK2023677018**

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement LIFE-IP SK AQ Improvement with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

Ministry of Environment of the Slovak Republic (MoE SR)

Public body

Official registration number: 42181810

Namestie L. Stura 1, 812 35, Bratislava, Slovak Republic

VAT Number: 2023106679

represented by Gabriela Fischerová, Director General, Directorate for Climate Change and Air Protection.

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in

particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).

2. The associated beneficiary will contribute 140 938 € to the project.

My organisation will participate in the implementation of the following actions:
E, C2, F1, F2

The estimated total cost of my organisation's part in the implementation of the project is 1 409 384 €.

3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.

4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Bratislava on 30/7/2019

Signature of the Associated Beneficiary:



Robert MISKUF, CEO



ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

PaedDr. Milan Majerský, PhD.

representing,

Prešov Self-governing Region (PSK)

official legal status or form: regional public body

official registration No: 378 704 75

full official address: Námestie mieru 2, 080 01 Prešov, Slovak Republic

VAT number: 202 162 6332

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie Ľ. Štúra 1, 812 35, Bratislava, Slovak Republic

VAT number: 202 310 6679

represented by Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).

2. The associated beneficiary will contribute **43 200 EUR** to the project.

My organisation will participate in the implementation of the following actions: C1.1, E and F.

The estimated total cost of my organisation's part in the implementation of the project is **432 000 EUR**.

3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.

4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Prešov on 15.07.2019

Signature of the Associated Beneficiary:

Name(s) and status/function of signatory:



ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

Mr. Jaroslav Baška

representing,

Trenčín Self-governing Region (TSK)

official legal status or form: regional public body

official registration No: 361 266 24

full official address: K dolnej stanici 7282/20A, 911 01 Trenčín, Slovak Republic

VAT number: 202 161 3275

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie Ľ. Štúra 1, 812 35, Bratislava, Slovak Republic

VAT number: 2023106679

represented by Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).

2. The associated beneficiary will contribute **43 200 EUR** to the project.

My organisation will participate in the implementation of the following actions: C1.1, E and F.

The estimated total cost of my organisation's part in the implementation of the project is **432 000 EUR**.

3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.

4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Trenčín on 16 July 2019

Signature of the Associated Beneficiary:

Name(s) and status/function of signatory:



Ing. Jaroslav Baska

Chairman of the Trenčín Self-governing Region

ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

Ms. Erika Jurinová

representing,

Žilina Self-governing Region (ŽSGR)

official legal status or form: regional public body

official registration No: 37 808 427

full official address: Komenského 48, 011 09 Žilina, Slovak Republic

VAT number: 202 162 66 95

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie Ľ. Štúra 1, 812 35, Bratislava, Slovak Republic

VAT number: 202 310 6679

represented by Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement and in particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement

I furthermore certify that:

- 1 The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012)
- 2 The associated beneficiary will contribute **43 200 EUR** to the project
My organisation will participate in the implementation of the following actions C1.1 E and F.
The estimated total cost of my organisation's part in the implementation of the project is **432 000 EUR**.
- 3 The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.
- 4 I commit to comply with all relevant eligibility criteria as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Zilina on 9.7.2019

Signature of the Associated Beneficiary:

Name(s) and status/function of signatory:



ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

RNDr. Richard Müller, PhD.

representing,

Slovak Environment Agency (SEA)

official legal status or form: Public body

official registration No: 00626031

full official address: **Tajovského 28, 975 90, Banská Bystrica, Slovak Republic**

VAT number: 2021125821

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: **Ministry of Environment of the Slovak Republic (MoE SR)**

official legal status or form: public body

official registration No: 42181810

full official address: **Námestie Ľ. Štúra 1, 812 35, Bratislava, Slovak Republic**

VAT Number: 2023106679

represented by **Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection**

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to

provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).
2. The associated beneficiary will contribute **1 554 429 EUR** to the project.
My organisation will participate in the implementation of the following actions:
C1.1, C2, E and F. The estimated total cost of my organisation's part in the implementation of the project is **3 962 336 EUR**.
3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.
4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Banska Bystrica on 09 August 2019

Signature of the Associated Beneficiary:



Name(s) and status/function of signatory:

RNDr. Richard Müller, PhD., Director General

**SLOVENSKÁ AGENTÚRA
ŽIVOTNEHO PROSTREDIA**
Tajovského 28
975 90 BANSKÁ BYSTRICA
-12-

ASSOCIATED BENEFICIARY DECLARATION and MANDATE

I, the undersigned,

Mr. Jozef Viskupič

representing,

Trnava Self-governing Region (TTSK)

official legal status or form: regional public body

official registration No: 37836901

full official address: Starohájska 10, 917 01 Trnava, Slovak Republic

VAT number: 202 162 8367

hereinafter referred to as "the associated beneficiary",

for the purposes of the signature and the implementation of the grant agreement **LIFE-IP SK AQ Improvement** with the Contracting Authority (hereinafter referred to as "the grant agreement")

hereby:

1. Mandate

full official name of the coordinating beneficiary: Ministry of Environment of the Slovak Republic (MoE SR)

official legal status or form: public body

official registration No: 42181810

full official address: Námestie Ľ. Štúra 1, 812 35, Bratislava, Slovak Republic

VAT number 202 310 6679

represented by Ms. Gabriela Fischerová, Director General, Directorate of Climate Change and Air Protection

(hereinafter referred to as "the coordinating beneficiary")

to sign in my name and on my behalf the grant agreement and its possible subsequent amendments with the Contracting Authority.

2. Mandate the coordinating beneficiary to act on behalf of the associated beneficiary in compliance with the grant agreement.

I hereby confirm that the associated beneficiary accepts all terms and conditions of the grant agreement and, in particular, all provisions affecting the coordinating beneficiary and the associated beneficiaries. In particular, I acknowledge that, by virtue of this mandate, the coordinating beneficiary alone is entitled to receive funds from the Contracting Authority and distribute the amounts corresponding to the associated beneficiary's participation in the action.

I hereby accept that the associated beneficiary will do everything in its power to help the coordinating beneficiary fulfil its obligations under the grant agreement, and in particular, to provide to the coordinating beneficiary, on its request, whatever documents or information may be required.

I hereby declare that the associated beneficiary agrees that the provisions of the grant agreement, including this mandate, shall take precedence over any other agreement between the associated beneficiary and the coordinating beneficiary which may have an effect on the implementation of the grant agreement.

I furthermore certify that:

1. The associated beneficiary has not been served with bankruptcy orders, nor has it received a formal summons from creditors. My organisation is not in any of the situations listed in Articles 106(1) and 107 of Council Regulation No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union (OJ L298 of 26.10.2012).
2. The associated beneficiary will contribute **43 200 EUR** to the project.

My organisation will participate in the implementation of the following actions: C1.1, E and F.

The estimated total cost of my organisation's part in the implementation of the project is **432 000 EUR**.

3. The associated beneficiary will conclude with the coordinating beneficiary an agreement necessary for the completion of the work, provided this does not infringe on our obligations, as stated in the grant agreement with the Contracting Authority. This agreement will be based on the model proposed by the Contracting Authority. It will describe clearly the tasks to be performed by my organisation and define the financial arrangements.
4. I commit to comply with all relevant eligibility criteria, as defined in the LIFE Multiannual Work Programme 2018-2020 and the LIFE Call for Proposals including the LIFE Guidelines for Applicants.

This declaration and mandate shall be annexed to the grant agreement and shall form an integral part thereof.

I am legally authorised to sign this statement on behalf of my organisation.

I have read in full the LIFE Model Grant Agreement and the Financial and Administrative GUIDELINES provided with the LIFE application files.

I certify to the best of my knowledge that the statements made in this proposal are true and the information provided is correct.

At Trnava on 04.07.2019.

Signature of the Associated Beneficiary:

Name(s) and status/function of signatory:

