**Information about the company**

|  |  |
| --- | --- |
| Business name |  |
| Legal form of the company |  |
| Legal residence of the company:  City |  |
| Legal residence of the company:  Street address |  |
| Legal residence of the company:  Zip Code |  |
| Legal residence of the company:  Province / Country |  |
| Phone number |  |
| Fax number |  |
| **VAT number** (if company has no VAT number please specify **NO VAT)** |  |
| **Fiscal code of  the company** (or other identification number) |  |
| Administrative branch address (if different from legal residence): City |  |
| Street address |  |
| Zip code |  |
| Province / Country |  |

**Bank details**

|  |  |
| --- | --- |
| Bank name |  |
| Agency number |  |
| Address |  |
| City |  |
| IBAN code |  |
| Swift/Bic code |  |
| Assignee |  |
| Other co-signers or authorized persons (Name and surname) |  |
| Tax code / National Insurance number / Personal ID number |  |

**The interested party declares to have reviewed the information concerning the processing of personal data pursuant to Art. 13 of EU Regulation 2016/679 which is available at the following link:** [**http://utov.it/s/privacy**](http://utov.it/s/privacy)

|  |  |  |  |
| --- | --- | --- | --- |
| The Undersigned (name, surname): |  | | |
| Place of Birth: |  | Date of Birth: |  |
| Email address: |  | | |
| Tax code / National Insurance number /  Personal ID number (if applicable): |  | | |
| Signature: |  | | |

**Please attach a valid ID**