

THIS DOCUMENT IS MERELY AN INFORMATIVE TRANSLATION TO HELP FOREIGN ECONOMIC OPERATORS (I.E. SUPPLIERS/ CONTRACTORS) UNDERSTAND THEIR RIGHTS AND OBLIGATIONS IN THE BELOWMENTIONED PROCUREMENT PROCEDURE AND HAS NO LEGAL EFFECTS WHATSOEVER. LEGALLY BINDING IS THE AFFIRMATION IN CZECH LANGUAGE. PLEASE TAKE THIS IN ACCOUNT WHEN READING THIS INFORMATIVE DOCUMENT.

Annex no. 1 – Affirmation

AFFIRMATION OF THE FULFILLMENT OF THE QUALIFICATION

Name of public contract: 078_Ve_NB_Sedící manekýn_Thermal Manikin System
Int. no. of public contract: 18/9615/078

Operational program Výzkum, vývoj a vzdělávání
Project title: Podpora rozvoje studijního prostředí na TUL
Reg. no. of project: CZ.02.2.67/0.0/0.0/17_044/0008541

Contracting authority:

Business Name: Technická univerzita v Liberci
Address: Studentská 1402/2, 461 17 Liberec
ID: 46747885
Statutory representative: doc. RNDr. Miroslav Brzezina, CSc., rector

Identification information of the participant:

Business Name:
Address:
ID:
Statutory representative:

A. Basic qualification:

1. The economic operator declares that it meets the basic qualification according to Section 74 of Act No. 134/2016 Coll., on Public Procurement (hereinafter referred to as the „APP“), i. e. the economic operator:

- a) was not convicted by final judgement in the country of its registered seat of a crime specified in Annex No. 3 to this Act or another similar crime pursuant to the law of the country of its registered office in the past five years preceding the commencement of the procurement procedure; expunged convictions are disregarded,



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- b) has not outstanding tax arrears registered in tax records in the Czech Republic or in the country of its registered office,
- c) has not outstanding arrears in respect of payments and penalties of public health insurance in the Czech Republic or in the country of its registered office,
- d) has not outstanding arrears in respect of payments and penalties of social security contributions and contribution to the national employment policy in the Czech Republic or in the country of its registered office,
- e) is not in liquidation, has not been declared insolvent, in respect of whom the receivership has not been imposed under another legal regulation or it is not in a similar situation pursuant to the law of the country of its registered office.

2. The economic operator declares that if it is a legal person, both this legal person and every member of its governing body shall meet the condition specified in paragraph a) of subsection (1). Where a legal person is a member of the governing body of the economic operator, the condition specified in paragraph a) of subsection (1) shall be met by

- a) this legal person,
- b) every member of the governing body of this legal person, and
- c) the person representing this legal person in the governing body of the economic operator.

(3) The economic operator declares that if it is a branch of a business of

- a) a foreign legal person, the condition specified in paragraph a) of subsection (1) shall be met by this legal person as well as the head of the branch,
- b) a Czech legal person, the condition specified in paragraph a) of subsection (1) shall be met by the persons referred to in subsection (2) as well as the head of the branch.

B. Professional qualification

The economic operator declares that it meets the professional qualification pursuant to Section 77 (1) of ZZVZ, i.e. that it holds copy of an entry in the Commercial Register or other similar records provided that registration in such records is required pursuant to another legal regulation.

This affirmation substitutes the submission of documents to proving qualification pursuant to Section 86 (2) of ZZVZ.

The economic operator declares, that is is aware of that in the case it is selected to conclude a public contract, it will submit **the originals or certified copies of the qualification documents** to the contracting authority prior to the conclusion of the public contract.

Date of signature: Place of signature:

Name and surname of the person / persons authorized to act on behalf of the applicant:

Name:..... Signature:



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