**Annex A**

**Expression of Interest Application Form**

**Composition of the Sectorial Consortium**

**(at least 1 EU Chamber, at least 1 EaP Chamber, up to a max. of 4 chambers creating the consortium)**

|  |  |
| --- | --- |
| EU Chambers of Commerce  Max 2 EU Chambers | * Name : …………………………………..   Country :…………………………………   * Name : …………………………………..   Country :………………………………… |
| EaP Chamber of Commerce  Max 2 EaP Chambers | * Name : …………………………………..   Country :…………………………………   * Name : …………………………………..   Country :………………………………… |
| Name of Sectoral Consortium Lead Chamber | * Name : …………………………………..   Country :………………………………… |
| Chosen sector |  Wine   Bio- / organic food   Textile   Tourism   Creative Industries |

**Specific information to be filled by each applying Chamber**

|  |  |
| --- | --- |
| Name of the Chamber of Commerce | Name  Adress  Country |
| Name of the National Chamber Organisation member of EUROCHAMBRES | Name  Adress  Country |
| Cooperation links with EU CCIs or EaP CCIs | EU CCIs EaP CCIs  …………….. .………………..  …………….. .………………..  …………….. .………………..  …………….. .………………..  …………….. .………………..  …………….. .……………….. |
| Participation of the Chamber in EAST INVEST I or EAST INVEST II | □ EAST INVEST 1  □ EAST INVEST II |
| Expertise of the Chamber in the chosen sector |  |
| Number of Business to Business Matchings | □ 01 to 20  □ 21 to 50  □ +50 |
| Number of Study visits | □ 01 to 20  □ 21 to 50  □ +50 |
|  |  |
| Name and function of the authorized representative signing the expression of interest | Name  Function |
| Name and function of the 1st proposed CCI representative to be part of the Sectorial Consortium CV required | Name  Function  Email  Telephone |
| Capacity to manage and implement projects Years of experience | □ 1 to 3 years  □ 4 to 7 years  □ 7 years + |
| Name and function of the 2nd proposed CCI representative to be part of the Sectorial Consortium  If applicable  CV required | Name  Function  Email  Telephone |
| Capacity to manage and implement project  Years of experience | □ 1 to 3 years  □ 4 to 7 years  □ 7 years + |
|  |  |

**Date and signature of the authorized representative of the applicant Chamber**

**Date**

**Signature**

**Annex 1**

Types of action

A project contributing to:

* Develop Business Support Organizations internal capacity to enhance SMEs’ internationalisation and export capacities;
* Foster EU and EaP Business Support Organizations’ cooperation;
* Develop quality business networks including providing adequate support and business linkages for SMEs (in the five sectors bio/ organic food, wine, creative industries , textiles and tourism);
* Develop sector specific Business Support services availability; ensure relevance and appropriateness to EaP context;
* Offer tailor made services to SMEs that contribute to improving their competitiveness and productivity;
* Strengthen support networks for SMEs, for example, Business Membership Associations;
* Contribute to a more conducive business environment for SMEs or to better policies for SMEs;
* Improving gender equality in the aforementioned actions;
* Supporting development of new/expanded services to BSOs and SMEs.

The following types of action are ineligible:

* actions concerned only or mainly with individual sponsorships for participation in workshops, seminars, conferences and congresses;
* actions concerned only or mainly with individual scholarships for studies or training courses;
* purchase of hardware and equipment at large (including vehicles, machinery), financial support to enterprises, one-off conferences, support to political parties, actions including proselytising, actions which discriminate individuals or groups on grounds of their sexual orientation, religious beliefs or lack of them, or their ethnic origin.
* actions for which the Applicant is already receiving funding e.g. from the Governmental budget, other Community programmes or other funds,
* activities started before the signing of the contract with EUROCHAMBRES.
* actions consisting solely of commercial activities,
* actions which are ideologically biased or partisan in nature,
* actions supporting political parties,
* financial support activities (i.e. the use of the grant to make further grants (financial or in-kind) or loans to other organisations or individuals such as for those who are establishing their businesses),
* construction or investments for the adoption of new/supplementary facilities,
* actions that include provisions to finance the core activities currently carried out by applicants.
* actions consisting solely of the development of strategies, plans or other similar documents,
* social service actions such as provision of food, clothing.

**AFFILIATED ENTITY Annex 2**

### Definition of an Affiliated entity as provided by the EC

Affiliated entities are neither beneficiaries of the action nor parties to the contract. However, they participate in the design and in the implementation of the action and the costs they incur (including those incurred for implementation contracts and financial support to third parties) may be eligible, provided they comply with all the relevant rules already applicable to the beneficiaries under the grant contract. Affiliated entities must satisfy the same eligibility criteria as the lead applicant (*in this case EUROCHAMBRES*) or the co-applicant to which they are affiliated.

Only entities having a structural link with the applicant (*EUROCHAMBRES*), in particular a legal or capital link, may be considered as affiliated entities to the applicant (*EUROCHAMBRES*) and/or to co-applicant(s).

### 1.2 Description of the affiliated entity(ies)

This section must be completed for each applying CCI

|  |  |
| --- | --- |
| **If fulfilling the criteria and conditions to be considered as affiliated entity(ies) specify to which entity you are affiliated detailing the specific nature of the affiliation (i.e. parent entity,**  **family organisation / network entity, etc)** |  |
| **Official address of** **Registration** |  |
| **Country of registration**/ **Nationality** |  |
| **Contact person** |  |
| **Telephone number**: country code + city code + number |  |
| **E-mail address** |  |
| **Number of employees** |  |
| **History of cooperation with EUROCHAMBRES** |  |
|  |  |
|  |  |

### Annex 3

### Affiliated entity's statement

**Required by the European Commission**

**For information only**

**To be signed by each CCI if the CCI is selected at a later stage**

To ensure that the action runs smoothly, the European Commission (Contracting Authority) requires all affiliated entity(ies) to acknowledge the principles as set out below.

1. All affiliated entity(ies) must have read the guidelines for applicants and grant application form and understood their role in the action before their application is submitted to the Contracting Authority.
2. All affiliated entity(ies) must have read the standard grant contract (or PA Grant Agreement, where applicable) and understood what their respective obligations under the contract will be if the grant is awarded. They authorise the organisation to which they are affiliated to sign the contract on their behalf with the Contracting Authority and represent them in all dealings with the Contracting Authority in the context of the action’s implementation.
3. The affiliated entity(ies) must consult regularly with the organisation to which they are affiliated whom, in turn, should keep them fully informed of the progress of the action.
4. All affiliated entity(ies) must receive copies of the reports — narrative and financial — made to the Contracting Authority.
5. Proposals for substantial changes to the action (e.g. activities, affiliated entity(ies), etc.) should be agreed by the affiliated entity(ies) before being submitted to the Contracting Authority.

I have read and approved the contents of the grant contract and its annexes submitted to the Contracting Authority. I undertake to comply with the principles of good partnership practice.

|  |  |
| --- | --- |
| Name: |  |
| Organisation: |  |
| Position: |  |
| Signature: |  |
| Date and place: |  |

**Annex 4**

**To be signed by each CCI**

Declaration PADOR

EU Grant contract N°ENI/2019/411-865 EU4BCC

This is to confirm that < indicate the name of the organisation > information presented in the PADOR Registration System is up to date and accurate.

**Annex 5**

**Important: This application form must be accompanied by a signed and dated mandate from each applicant CCI, in accordance with the template provided below.**

**Mandate of the Applicant Chamber to EUROCHAMBRES**

<Name of the applicant Chamber> authorises **EUROCHAMBRES** to submit on their behalf the present application form and to sign, on their behalf, the amendment to the EU Grant contract N°ENI/2019/411-865 EU4BCC with the European Commission . <The name of the Applicant Chamber >agrees that EUROCHAMBRES will represent the Chamber in all matters concerning this grant contract.

I undersigned < Function within the Applicant CCI> have read and approved the contents of the proposal submitted to the European Commission . I also undertake that <Name of the Applicant CCI> will comply with the principles of good partnership practice.

|  |  |
| --- | --- |
| Name: |  |
| Organisation: |  |
| Position: |  |
| Signature: |  |
| Date and place: |  |