## A2.1: Who we are

Project 261504	Project agronym 2 EDE	Next	Participant number in this project <sup>10</sup>	Participant short name 11
			er participant	
Participation of the Control of the	·		l data	
If your organisation ha	is already registere	d for FP7, enter your	Participant Identity	984764468
Participant legal name	19	L. SAKVARELIDZE HEALTH	NATIONAL CENTE	R FOR DISEASE CONTROL AND PUBLIC
Participant short name	11	NCDC		
Status of validation 16		DRAFT		
Legal address of the p	articipant			
Street name 15	M. Asatiani		Number <sup>15</sup>	9
Town 15	Tbilisi			
Postal code / Cedex 15	0177			
Country 18	Georgia			
Internet homepage (optional)	www.ncdc.ge			
Registration data of the	e participant	, MAPY (1)		
Legal registration numl	oer <sup>17</sup>		040.030.000.08.00	2.004.314
Place of registration 17	The second secon		Ministry of Justice	of Georgia
Date of registration 17			19/03/2007	
VAT number 18			GE	
Legal form <sup>19</sup>			Other	
Legal Entity Appointed	Representative (Li	AR) <sup>20</sup>		
Family name			First name(s)	
Phone 1 <sup>21</sup>			Phone 2 21	
E-mail			Fax <sup>21</sup>	

Participant number in this project <sup>so</sup> Project number-Project acronym ² Participant short name <sup>11</sup> 261504 **EDENext** NCDC

#### One form per participant

#### rganisation

er FP7 participation rules. If you are one of these, please tick

		Status of your o
		types of organisations benefit from special conditions unde propriate box(es) below. 22
You	ror	ganisation is:
		Natural person
X		Legal person
	X	Non profit
		Research Organisation
	K	Public body
		International organisation
		<ul> <li>International organisation of european interest</li> </ul>
		Secondary and higher education establishment
		Enterprise
		SME
Indir	ect	costs 41:
		Actual indirect costs 42
		Simplified method 43
		Standard flat rate 44
		Special transitional flat rate 45

# A2.3: Authorised Representatives

Project 261504	Project EDENext		Participant short arne 11 NCDC
MARKET AND AND	One for	orm per participant	
First authorised repres	sentative to sign the grant agreem	ent or to commit the organisation	n for this project
Family name	Imnadze	First name(s)	Paata
Title. <sup>34</sup>	Dr.	Gender <sup>99</sup> (Female – F / Male – M)	M
Position in the organis	ation <sup>36</sup>	Director	
Department/Faculty/In	stitute/Laboratory name/ <sup>37</sup>	regions of the profit of the control	
Address (if different fro	om the legal address) 12		
Street name 15		Number 15	
Town 15			
Postal code / Cedex 15	and the second s		
Country 16			·
Phone 1 21	+995 32 398946	Phone 2 21	
E-mail	ncdc@ncdc.ge	Fax <sup>21</sup>	+995 32 311485
Second authorised rep	resentative to sign the grant agree	ament or to commit the organisa	ition for this project
Family name	Tsanava	First name(s)	Shota
Title <sup>34</sup>	Dr.	Gender <sup>35</sup> (Female – F / Male – M)	М
Position in the organisa	ation <sup>36</sup>	Deputy Director	
Department/Faculty/Ins	stitute/Laboratory name/ <sup>37</sup>	National Center for Disea Asatiani Steet - 0177 Tb	ase Control and Public Health - 9 M. lisi - Georgia
Address (if different fro	m the legal address) 12		
Street name 15		Number 16	
Town 15			
Postal code / Cedex 15			
Country 18			•
Phone 1 <sup>21</sup>	+995 32 398946	Phone 2 21	
E⊰mail	ncdc@ncdc.ge	Fax <sup>21</sup>	+995 32 311485

### A2.4: How to contact us

Project 261504	Project EDENext		articipant short ame <sup>11</sup> NCDC
	One fo	rm per participant	
		ersons for this project	
Person in charge of ac	dministrative, legal and financial as	pects in this project	
Eamily name	Giorgobiani	First name(s)	Ekaterina
Title <sup>34</sup>	Dr.	Gender <sup>35</sup> (Female – F / Male – <b>M</b> )	F
Position in the organis	ation <sup>36</sup>	Principal Officer	
Department/Faculty/in	stitute/Laboratory name/ <sup>97</sup>	Malaria and other Protoz Department	coonosis and Helminthozoonosis
Address (if different fro	om the legal address)	The second of th	
Street name 15	14.6   150   最終	Number 15	
Town 15			
Postal code / Cedex 15	0		
Country 16			
Phone 1 <sup>21</sup>	+995 77 72 84 36	Phone 2 21	+1 540 760 4705
E-mail	egiorgobiani@yahoo.com	Fax <sup>21</sup>	+995 32 311485
Person in charge of sc	ientific and technical/technological	aspects in this project	
Family name	Giorgobiani	First name(s)	Ekaterina
Title <sup>34</sup>	Dr.	Gender <sup>36</sup> (Fernale – F / <sup>3</sup> Male – M)	F
Position in the organisa	ation <sup>35</sup>	Principal Officer	
Department/Faculty/Ins	stitute/Laboratory name/ <sup>37</sup>	Malaria and other Protoz Department	oonosis and Helminthozoonosis
Address (if different fro	m the legal address) <sup>12</sup>		
Street name <sup>15</sup>		Number 15	
Town 16			
Postal code / Cedex 15			
Country <sup>te</sup>			
Phone 1 <sup>21</sup>	+995 77 72 84 36	Phone 2 21	+1 540 760 4705
E-mail.	egiorgobiani@yahoo.com	Eax <sup>21</sup>	+995 32 311485

#### A2.5: Our commitment

Project 261504 Project 2 EDENext	Participant hort name 11 NCDC
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#### One form per participant Certified declaration

1- As an authorised representative to sign the grant agreement or to commit the abovementioned organisation, I am fully aware that a grant agreement may not be awarded to an applicant who is, at the time of a grant award procedure, in one of the situations referred to in Articles 93(1), 94 and 96(2)(a) of the Council Regulation (EC, Euratom) N° 1995/2006 of 13 December 2006 on the Financial Regulation applicable to the general budget of the European Union [OJ L 390, 30/12/2006, p1].

As a consequence, I certify that:

- In compliance with article 93(1) of the abovementioned Regulation, none of the following cases apply to our organisation:
  - a) it is bankrupt or being wound up, is having its affairs administered by the courts, has entered into an arrangement with creditors, has suspended business activities, is the subject of proceedings concerning those matters, or is in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
  - b) it has been convicted of an offence concerning its professional conduct by a judgment which has the force of res judicata;
  - c) it has been guilty of grave professional misconduct proven by any means which the contracting authority can justify;
  - d) it has not fulfilled obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which it is established or with those of the country of the contracting authority or those of the country where the contract is to be performed;
  - e) it has been the subject of a judgment which has the force of res judicata for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the communities' financial interests:
  - f) it is currently subject to an administrative penalty referred to in Article 96(1) of the above-mentioned regulation.
- In compliance with article 94 of the abovementioned Regulation, and as far as the current grant award procedure is concerned, our organisation:
  - g) is not subject to a conflict of interest;
  - h) has not made false declarations in supplying the information required by the Commission as a condition of participation in the grant award procedure or does not fail to supply this information;
  - i) is not in one of the situations of exclusion, referred to in the abovementioned points a) to f).
- 2- As an authorised representative to sign the grant agreement or to commit the abovementioned organisation, I also certify that our organisation:
  - is committed to participate in the abovementioned project;
  - has stable and sufficient sources of funding to maintain its activity throughout its participation in the abovementioned project and to provide any counterpart funding necessary;
  - has or will have the necessary resources as and when needed to carry out its involvement in the abovementioned project.
- 3- As an authorised representative to sign the grant agreement or to commit the abovementioned organisation, I finally certify that all the information relating to our organisation set out in the different Grant Agreement Preparation Forms are complete, accurate and correct; and that the estimated costs meet the criteria for eligible costs for FP7 projects as established by the EU model grant agreement are notably based on our usual accounting and management principles and practices, and reflect the costs expected to be incurred in carrying out the foreseen work described in Annex I (description of work).
- 4- Our organisation is fully aware that the Commission may impose administrative or financial penalties on legal entities who are guilty of misrepresentation in supplying the information required by the Commission as a condition of participation in the grant award procedure or fail to supply this information; have been declared to be in serious breach of their obligations under any contract/grant agreement covered by the budget of the Commission. Such penalties shall be proportionate to the importance of the contract/grant agreement and the seriousness of the misconduct, and may consist in their exclusion from the contracts and grants financed by the budget of the Commission for a maximum period of ten years and payment of financial penalties.
- 5- As an authorised representative I certify that the information given in the form A2.2 is correct.

### A2.5: Our commitment

		IONAL CENTER FOR DISEASE CON	
Family name of authorised representative	Imnadze	First Name(s)	Paata
Date		Signature of the authorised representative to sign the grant agreement or to commit the organisation <sup>38</sup> .	
Family name of authorised epresentative	Tsanava	First Name(s)	Shota उन्हें के लगा करें
Oate	11.07.10	Signature of the authorised representative to sign the grant agreement or to committhe organisation <sup>36</sup>	

Funding % for RTD/Innovation activities (A) ** 75.0%  Indirect costs **  Actual indirect costs **   Simplified method **  Standard flat rate **   Standard flat rate **	Project number 261504 Project acronym 2 EDENext	Participant number in this 5  project 5  One Form per Participant	Participant short name " NCDC
Actual indirect costs <sup>42</sup> Simplified method <sup>43</sup>	75.0%		
	Indirect costs."		
Simplified method <sup>43</sup>			
	Simplified method <sup>43</sup> Standard flat rate <sup>44</sup>		

My legal entity is established in an ICPC 49 and I shall use the lump sum funding method No

					Receipts
00/200/00	0.80	0,00	0.00	100,200.00	Requested EU contribution
133,600.00	0.00	0.00	0.00	133,600.00	Total costs
50,100.00	0.00	0.00	0.00	50,100.00	Indirect costs
35,500.00	0.00	0.00	0.00	35,500.00	Ulher directicosis
0.00	0.00	0.00	0.00	0.00	Subcontracting
0 48,000.00	0.00	0.00	0.00	48,000.00	reisonnel costs
	Other (b)	Management (C)	Demonstration (B)	RTD / Innovation (A)	
		Type of Activity			