# Certify (Tax Credits)

# Claim Form for Approved Certifications

**Deadline: 31st December 2017 (10:00 CET)**

**This form is to be used in cases where the certifications, quality marks or licences have been pre-approved by the Corporation and included in the list of pre-approved certifications that may be found on the Corporation’s website at** [**http://www.maltaenterprise.com/en/certify**](http://www.maltaenterprise.com/en/certify)





**For Office Use Only**

Reference Number

Date Received by the Corporation

Complete Application

**Notes to Applicants**

* This form is to be used by eligible undertakings that wish to benefit from the Certify Scheme.
* An Undertaking claiming a tax credit for the attainment of a qualifying certification, is to submit to the Corporation the following documentation **within three (3) months from the attainment of the Certification and by not later than 31st December 2017 (10 a.m CET time)**:

A copy of the documentation issued from the Certifying Body showing that the applicant has been granted a qualifying Certification.

A confirmation from the certifying body that conducted the first time audits, due diligence or verification service confirming the date when the service was rendered and that the verification was carried out in relation to a new certification and was not related to a renewal (or any other similar occurrence).

A detailed curriculum vitae of any consultants contracted.

The consultant’s contract of service.

A fiscal invoice or fiscal receipt for all costs claimed.

Proof of payment (copy of enchased cheque or details related to the bank transfer) in relation to all the eligible costs.[[1]](#footnote-1)

The following costs may be considered as eligible as per Incentive Guidelines Version 2. It is recommended to consult with the latest Incentive Guidelines prior to submitting the application. **The capping established by the Corporation is final.**

**(A) Consultancy Costs**

Consultancy services leading to qualifying certifications shall be considered eligible. The capping established by the Corporation is final.

**(B) Certification Costs**

Costs incurred from a Certifying Body as may be required by the undertaking to achieve the Certification. These costs may include first time audits, due diligence or verification service.

* The maximum aid intensity shall be capped as follows:

|  |  |
| --- | --- |
| Eligible Costs | % |
| Consultancy | 50 |
| Certification | 75 |

* In view that VAT is an ineligible cost, any value entered should exclude VAT.
* All monetary values should be presented in Euro. When quotations are in foreign currencies kindly [click here](http://www.ecb.europa.eu/stats/exchange/eurofxref/html/index.en.html) to refer to the daily exchange rate to Euro. The exchange rate used should be quoted on the relevant documentation.
* This Form and any attached documents will be treated as confidential throughout and after the project evaluation process.
* All replies must be clearly explained and substantiated.
* Only electronically filled in application forms will be accepted. Should the application be hand-written or should the format of the application form be altered, the application form will not be evaluated.
* Further information, as well as information and guidance on the filling in of this application form may be obtained by contacting Malta Enterprise during office hours or by calling 144 or via email on [info@businessfirst.com.mt](mailto:info@businessfirst.com.mt)

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| --- | --- |
| 1. Applicant Details | |
| Macintosh HD:Users:nigelanastasi:Desktop:dots-01.png | |
| 1.1 Name of Applicant: | |
| This section should specify the legal name of the enterprise as defined in the Memorandum of Articles. In the case of Partnerships and Co-operatives the name outlined in the deed of partnership should be used in this section. In the case of Sole Traders, the name of the sole trader shall be inserted. |  |
| 1.2 Address of Applicant: | |
| This section should specify the address of the Applicant. The address inserted here will be used to address any mail correspondence to the Applicant. |  |
| 1.3 Applicant’s Telephone Number/s: | |
| The Applicant’s general telephone number/s. |  |
| 1.4 Applicant’s e-mail: | |
| The Applicant’s general e-mail address. |  |
| 1.5 Website (URL): | |
| The Applicant’s website address. |  |
| 1.6 VAT Number: | |
| The Applicant’s VAT Number, as per VAT Certificate, relating to the activities funded under the proposed project. |  |

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| --- | --- |
| 1.7 Legal Form of Undertaking: | |
| The legal form of the Applicant may be, self employed, co-operative, registered company, or partnership. | Choose an item. |

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| --- | --- | --- |
| 1.8 Registration / Identification Number: | | |
| The registration number is the official registration number of the co-operative, company or partnership as defined in the Companies Act – Chapter 387 of the Laws of Malta. | |  |
| 1.9 Date Established:: | | |
| This is the date, the enterprise was first established. Where applicable this will be the date of registration as defined in the Companies Act – Chapter 387 of the Laws of Malta. | | Click here to enter a date. |
| 1.10 Please provide an outline of the Applicant’s core business activities: | | |
| The Applicant is required to provide a background description of the enterprise and its operations. The information should highlight the Applicant’s main line of business. The Applicant should show its main markets, clearly describing key products and/or services provided in these markets and its relative market share in these markets. | | |
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# **2. Details of Approved Certification, Quality Mark or Licence**

**This section is to be completed in cases where the certifications, quality marks or licences have been pre-approved by the Corporation and uploaded onto the Corporation’s website.**

**The level of funding is based on the amounts outlined in Section 3.3 of the Incentive Guidelines.**

**2.1 Name of Certification, Quality Mark or Licence**

Choose an item.

|  |  |
| --- | --- |
| 2.2.2 Name of Certification Body issuing the Quality Mark or Licence | |
| Enter the full name of the certification body that issues the above mentioned quality mark or licence. |  |

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| **3. Cost Breakdown** |

Eligible costs enlisted below must be rendered and paid for in line with Section 3.5 of the Incentive Guidelines.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type** | **Description** | **Invoice Number** | **Supplier** | **Value (ex VAT) €** |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| Choose an item. |  |  |  |  |
| **Total** | | | |  |

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| **5. Checklist of Documents** |
| Kindly use the following checklist of required documents to ensure that you enclose all the necessary documents. Kindly tick all the documents that you will be submitting together with this Application Form. An Undertaking claiming a tax credit for the attainment of an approved qualifying certification, is to submit to the Corporation the following documentation **within three (3) months from the attainment of the accreditation and by not later than 31st December 2017 10:00 hrs (CET time).[[2]](#footnote-2)** |
| Application Form completely filled in and duly signed  **Annex 1** – Copy of the documentation that demonstrates that the applicant has been granted an approved certification.  **Annex 2** – a confirmation from the accreditation body that conducted the first time audits, due diligence or verification service confirming that the date when the service was rendered and that the verification was carried out in relation to a new certification and was not related to a renewal (or any other similar occurrence);  **Annex 3** – De minimis Declaration. The purpose of this annex is to report all de minimis aid received, outlining the date, the scheme, and value of aid in Euros. The declaration form may be downloaded from: <http://support.maltaenterprise.com/deminimis>.  **Annex 4:** A detailed curriculum vitae of any consultants to be contracted.  **Annex 5:** The consultant’s contract of service as specified in Section 3.5 of the Incentive Guidelines.  **Annex 6:** Fiscal invoices or fiscal receipts for all costs claimed.  **Annex 7:** Proof of payment (copy of enchased cheque or details related to the bank transfer) in relation to all the eligible costs.[[3]](#footnote-3)  **Annex 8:** Copy of the Audit Report. |
| **6. Declaration**  **6.1 Personal Data Protection** Personal information provided in this form will be processed in accordance with the Data Protection Act, Cap 440 of the Laws of Malta and shall be treated in the strictest confidence. Information provided in this form will be processed by Malta Enterprise to assess the applicant’s eligibility, for the approval or otherwise of assistance under this scheme, for monitoring implementation of aid granted. The undersigned consents Malta Enterprise to share information provided in this application with Government Entities or the European Commission where this is strictly necessary for the proper administration of this incentive or where legally required.The undersigned hereby authorises Malta Enterprise Corporation to process the data contained in this form for the purpose stated above and declare that the information on this form and any other supporting documents given with this application is correct to the best of the undersigned’s knowledge. **6.2 Cumulation of Aid**  The undersigned declares that aid approved under this incentive is in line with the terms and conditions set out in the Incentive Guidelines and in line with Cumulation Article 8 of the Commission Regulation (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty.  **6.3 Double Funding**  The undersigned confirms that there has not been any approval or has been granted any public funding, financing or fiscal benefit in respect to the cost items included in this request for aid and will not seek funding or fiscal benefits for these cost items through other **National** and/or **European Union** measures. Such measures may include:   * Schemes administered by Malta Enterprise, the Planning and Priorities’ Coordination Division (PPCD), the Measure and Support Division, the Tourism and Sustainable Development Unit (TSDU), the Employment & Training Corporation (ETC), the Malta Council for Science & Technology (MCST), the Regulator for Energy and Water Services (REWS) and government funded schemes operated by other entities (such as JAMIE financial instrument). * Schemes funded through ERDF, ESF, Cohesion Fund, TEN-T Budget, EAFRD, EFF, LIFE+; Horizon 2020 and other European Union programmes/instruments.   **6.4 Outstanding Recovery Order**  The undersigned confirms that the applicant is not subject to an outstanding recovery order following a previous Commission decision declaring an aid illegal and incompatible with the internal market should be excluded from the scope of this Regulation.  **6.5 Transparency Obligations**  For any individual aid awarded in excess of €500 000, the details of the beneficiary; the aid awarded; and the project details; shall be published as provided for in Article 9 of the COMMISSION REGULATION (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty.  By submitting this application, I hereby acknowledge that the Corporation shall abide with any applicable transparency rules and may publish and make available to third parties information as required by such rules. |
| **7. Declaration**  The undersigned hereby authorises Malta Enterprise Corporation to process the data contained in this form for the purpose stated above and declare that the information on this form and any other information given in support of this application is correct to the best of the applicant’s knowledge.   |  |  | | --- | --- | | Name of Applicant (full legal name) |  |  |  |  | | --- | --- | | Name and Surname of signatory authorised to represent the Applicant (CAPITAL LETTERS) |  |  |  |  | | --- | --- | | Position in Establishment |  |  |  |  | | --- | --- | | Signature & Company Stamp |  |  |  |  | | --- | --- | | Date | Click here to enter a date. | |

1. In the case where costs are in a currency other than Euro the relevant amounts should be converted to Euro using the middle rate of exchange as determined by the European Central Bank. [↑](#footnote-ref-1)
2. The process of the approved certification must have commenced from 1st March onwards. [↑](#footnote-ref-2)
3. In the case where costs are in a currency other than Euro the relevant amounts should be converted to Euro using the middle rate of exchange as determined by the European Central Bank. [↑](#footnote-ref-3)