

SELF-CERTIFICATION

TO BE COMPLETED IN BLOCK CAPITALS by the owner of the service
or legal representative in the case of a legal entity.

Please complete all sections of the form. If any of the requested details are missing, the request may not be approved.

The undersigned _____

Tax code _____

Resident in _____ Postcode _____

Prov. (_____) Street _____ No. _____

Telephone _____ Email _____ @ _____

aware of the criminal sanctions in the event of providing false statements, preparing or using falsified documents, as referred to in art. 76 of Presidential Decree 445/2000, and pursuant to and for the purposes of art. 46 of the same Presidential Decree,

hereby declares

that the information provided for the purposes of filling in this form is true and accurate and

to be the legal representative of the following company:

Company Name _____

With registered office in _____ Prov. (_____) _____

Street _____ No. _____

VAT No. _____

And/or Tax Code No. _____

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to have the following VAT Number:

For **bodies/companies/businesses/associations** check both boxes and fill in the Company Details and VAT No. fields.
For **self-employed professionals** only check and fill in the VAT Number field.

Place _____ Date _____ Signature (stamp) _____

Also declares

to be the current holder of (select the relevant option):

Certified Email (PEC) account _____ @ _____

Domain www. _____

Username _____ @aruba.it

to belong to the VAT group which the following VAT Number is attributed to, which should be added to the details for the PEC

account and/or username indicated above, in place of the currently listed VAT Number:

Place _____ Date _____ Signature (stamp) _____

Declaration of Consent to Processing Personal Data

The undersigned declares that he/she has carefully read the Policy provided by Aruba S.p.A pursuant to Art. 13 of Regulation (EU) no. 2016/679 ("GDPR") available at aruba.it, and that he/she consents to the use of his/her Personal Data for the purposes indicated therein for the correct fulfilment of contractual obligations. The Customer also declares that he/she is aware that failure to grant consent to such processing may result in the provisions of the aforementioned Policy being applied.

Place _____ Date _____ Signature (stamp) _____

Attached:

- **Copy of both sides of a legible, valid ID document for the person making the request.**

Aruba reserves the right to request further documentation.