

SECRETARÍA DE ESTADO DE DIGITALIZACIÓN E INTELIGENCIA ARTIFICIAL



Applicant details	
Name	
Identification number	
Natural person or legal entity (choose one)	Natural person
	Legal entity
Registered address of the activity (natural person) or registered office (legal entity)	
Representative ¹	Name, surname(s), National ID Document / passport and position:
	If applicable, representative entity:
	Documents accrediting, if applicable, the representation:
	Sufficient power of attorney of the signatory of the proposal to draft the same.
	Other documents:
Social purpose and scope of action	
Name of the entity (as you wish it to be published)	

Contact details for notification purposes	
Name and surname(s)	
e-mail	
Telephone number	

¹ Details of the natural person who has powers of attorney. If acting under an agency or a contract of representation, you must indicate the details of the representative entity and attach supporting documentation of the existence of such representation and the capacity to sign the contract and the application on behalf of the applicant.



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Contact details for notification purposes		
Declarations	Accept the terms and conditions of the call: Yes No	
	Will the company submit itself to the jurisdiction of the Spanish Courts and Tribunals of any order, for all the incidents that in a direct or indirect way could arise from the contract, renouncing in its case, to the foreign jurisdiction that could correspond to it? ² Yes No	
	The company submits a report issued by the Permanent Diplomatic Mission or Consular Office of Spain of the place where the company has its registered offices, in which it is stated, after accreditation by the company, that they are registered in the local professional, commercial or similar register or, failing that, that they habitually act in local traffic in the area of the activities to which the object of the contract extends. Or another document to prove the business activity	
	Yes No Document provided:	
Personal Data processing	The participant acknowledges that he or she has read the personal data information contained in section 8 of this public call and expressly authorises the processing of the data contained in this application and accompanying documentation.	
	He/she understands that the contact details (name, surname and e-mail of the person) will be used for the management of the call based on art. 6.1.b of the GDPR.	
	Yes No	
	You would like us to keep your contact information to inform you about other actions, events, programs, initiatives of interest to the industry carried out by INCIBE:	
	Yes No	

In

, on

, 2020.

Signature

Name and surname(s) of legal representative

Position/ or condition in which you act as a representative

Applicant

² For companies from States that are not members of the European Union or signatories to the Agreement on the European Economic Area