**Applicare 1 unica**

**marca da bollo da**

**€ 16,0**

***‹‹***

***”››***

**All’Università degli Studi di Trieste**

**p.le Europa 1**

**34127 Trieste - Italia**

***Oggetto:*** Fornitura di un sistema di stimolazione magnetica transcranica e di n.1 unita' centrale di registrazione analisi completa di appositi amplificatori, trasduttori e sensori nonchè relative schede di memoria da installare presso la Scuola Superiore di Studi Avanzati (SISSA) di Trieste, nell’ambito del protocollo d’intesa per la realizzazione e lo sviluppo di una infrastruttura di ricerca per le “CONVERGING TECHNOLOGIES CUPJ97G17000020008 - .CIG 88976973D8

**-** Dichiarazione Bollo

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Il sottoscritto/a: | | | | |  | | | | | | | | | | nato/a a: |  | | | | | | | | | | il: | |  | | Codice fiscale: | | |  | | | | | | | | | | | | | In qualità di | | |  | | | | | | | | | | | | | dell’Impresa: | |  | | | | | | | | | | | | | | Codice fiscale n.: | | | | | |  | | P.IVA n.: |  | | | | | | | con sede legale in: | | | | | | |  | | | cap: | |  | | | | | via/piazza e n.: | | | |  | | | | | | | | | | | | |

in relazione alla gara d’appalto indicata all’oggetto, DICHIARA di accettare che Codesta Amministrazione provveda, in qualità di sostituto d’imposta, al versamento del Bollo di euro 16,00 dovuto ex DM 23/1/204 – comunicazione prot.n. 9771/2014 ai sensi dell’art. 2 della Tariffa, Parte prima, allegata al DPR 642/72 e della successiva risoluzione Ministeriale 96/E del 16/12/2013.