Member State Approval Form for Applicants

	EUROPEAN COMMISSION	**CONNECTING EUROPE FACILITY TRANSPORT**	

Applicant

Applicant's legal name	
Legal status	▼

Legal address			
Street name		Number	
City			
Postal code			
Country			

EU Member State Approval

Ministry's legal name	

Legal address			
Street name		Number	
City			
Postal code			
Country			
Phone			
Email			

Representative authorised to sign this Form			
Family name		First name(s)	
Function			

By signing below, the Member State representative endorses the application.

Date	
Signature of the competent EU Member State Ministry	

Member State Approval Form for Implementing Bodies

	EUROPEAN COMMISSION	**CONNECTING EUROPE FACILITY TRANSPORT**	

Implementing Body

Implementing Body's legal name	
Legal status	▼

Legal address			
Street name		Number	
City			
Postal code			
Country			

EU Member State Approval

Ministry's legal name	

Legal address			
Street name		Number	
City			
Postal code			
Country			
Phone			
Email			

Representative authorised to sign this Form			
Family name		First name(s)	
Function			

By signing below, the Member State representative endorses the application.

Date	
Signature of the competent EU Member State Ministry	

Electronically signed on 06/09/2019 11:03 (UTC+02) in accordance with article 4.2 (Validity of electronic documents) of Commission Decision 2004/563