

Příloha 10a

Partnership Commitment Statement

1. The following entities state their willingness to establish a partnership for the purposes of the project Name of the project submitted to the Name of the Programme Programme, funded by the EEA Grants 2014-2021:

- a. Project Applicant, with its head office in Address, represented by Legal representative of the Project Applicant, hereafter the '**Project Promoter**';
- b. Project Partner, with its head office in Address, represented by Legal representative of the Project Promoter, hereafter the '**Project Partner**'.

2. The Project Promoter and the Project Partner (hereafter the '**Parties**') agree to exercise their best efforts to establish a successful cooperation within the implementation of the project Name of the project.

3. The Parties declare they have familiarized themselves with the complete contents of the project proposal in the grant application, agree with the proposal, including their involvement in the implementation described in the grant application.

4. The Parties commit themselves to respect the principles of a good partnership based on mutual trust and respect, transparency, open and constructive dialogue to carry out a joint project. They shall immediately inform each other of any unexpected problems that may arise.

5. The Parties declare that the breakdown of their responsibilities with regard to the implementation, financing and sustainability of the project will be detailed in the Partnership Agreement. The Partnership Agreement will form the basis for the cooperation between the Parties and will be signed following the notification of the grant approval.

Project Applicant	
Organisation name / Name of Applicant*	
Legal status	
Business Registration Number	
VAT Number	
Address	
Legal representative (name and surname)	
Contact person (name and surname)	
Email	
Phone number	

* In case the applicant/project partner is a natural person.

Project Partner	
Organisation name / Name of Partner*	
Legal status	
Business Registration Number	
VAT Number	
Address / Legal residence address*	
Legal representative (name and surname)	
Contact person (name and surname)	
Email	
Phone number	

[Signatures of the persons that have the legal power to engage the organisation]

Signed on behalf of

XXX (*name of the organisation*)

XXX(*name of the organisation*)

XY(*name and function*)

XY(*name and function*)

on (*date*)

on (*date*)

* In case the applicant/project partner is a natural person.