

Please remember to complete in **BLOCK LETTERS** and endorse declaration in **Part III** below before submitting to the EU Funds Management Unit

Print or type
Details of Business

Business Name as Registered with VAT Dept.	
Trading Name <i>[if applicable]</i>	
Address	
Town/City	Post Code
Country	VAT Reg. Number
Contact Person	
Telephone Number	Fax Number
e-mail Address <i>[generic]</i>	

Print or type
Details of Account Holder
See **Specific Instructions** on page 2

Bank Account Holder	
Bank Name	
Branch Address	
Town/City and Post Code	
Country	
International Bank Account Number (IBAN) <i>[compulsary]</i>	
Bank Identifier Code (BIC)	

I the undersigned declare that all information filled herein and conferred to you is to the best of my knowledge and belief true, correct and complete. I understand and am fully aware that falsification of any information may jeopardize the validity of the payment issued thereon. I further declare that I have read and understood the details given on page 2 of this form, and unless otherwise directed, the above information may be used for future EU related payments.

Signature of
account holder ▶

Date ▶
[compulsory]

Signature of Treasury's Representative _____
Date _____

Signature of Contracting Authority/FB* (as applicable)
Date

* *Final Beneficiary*

Form **TR/S-9**

(January 2008)

Treasury Division

EU Funds Management Unit



Supply/Service Provider Financial Identification Number and Certification

Completed forms may be sent by fax or electronic mail prior to submission by normal post to the EU Funds Management Unit at the below indicated address.

PURPOSE OF FORM

The objective of the form is to provide the **EU Funds Management Unit** within the Treasury Division, with information necessary to perform **EU Related Payments** by means of a direct credit transfer at no additional cost.

PART I [BUSINESS DETAILS]

In the first part of the form the applicant must fill in the name of the business as well as other relevant business information.

PART II [BANKER]

In this section, the applicant is requested to enter banking information, indicating bank and account where to receive payment.

Special attention needs to be given when information submitted in this section does not conform to that already specified in the relevant contract documents (See **Specific Instructions** for further guidance).

For more information about the **International Bank Identification Number (IBAN)** the applicant is solicited to contact his local banker and ask for assistance.

PART III [CERTIFICATION]

Certification instructions. The applicant must ensure that the person designated to fill in the form and sign the certification has the proper capacity to do so.

In so doing the person endorsing the form must indicate his/her name and official capacity in the business.

Note: The form will not be considered valid if it is returned to the Treasury Division incomplete or without the required **Signature of account holder**.

SPECIFIC INSTRUCTIONS

If the bank account details are not in accordance with those indicated in the related contract document, the contractor shall immediately take the necessary steps to rectify his position and ensure that written confirmation for the alterations made to the terms and conditions of contract be obtained from the Contracting Authority.

The Treasury Division will not effect payment without the prior consent of the Contracting Authority. **Further information** on how to obtain the required approval may be obtained from the Director General, Contracts Department.

DATA PROTECTION NOTICE

The information we collect about the applicant depends on the nature of the business with us but may be used for the Division's purposes to safeguard public funds and prevent fraud. We may check information provided by the applicant or information about the applicant provided by a third party with other information held by us.

We may also get information about the applicant from certain third parties or give information to them to check the accuracy of information, to prevent or detect crime or to protect public funds in other ways as permitted by law. These third parties include other government entities and local authorities.

We will not disclose information about the applicant to anyone outside the Treasury Division unless the law permits us to do so. If the applicant wants to know more about what information we have about him, or the way we may use this information, further details can be obtained from the EU Funds Management Unit within the Treasury Division as per contact details below.

L-GHAN TAL-FORMOLA

L-ghan tal-formola hu li tipprovdi lill-**EU Funds Management Unit** fi hdan id-Divizjoni tat-Teżor, informazzjoni meħtieġa sabiex twettaq ħlasijiet marbuta ma' **I-Unjoni Ewropeja** direttament fil-kont bankarju, mingħar spejjeż addizzjonali.

L-EWWEL TAQSIMA [BENEFIĊĠARJU]

Fl-ewwel parti tal-formola, l-applikant għandu jnizze l-isem tan-negozju kif ukoll tagħrif ġenerali ieħor.

IT-TIENI TAQSIMA [DETTAJI TAL-BANK]

F'din it-taqsimha, l-applikant mitlub jimla l-isem tal-bank u d-dettalji tal-kont bankarju fejn jixtieq li jiġi ddepożitat il-ħlas.

Attenzjoni speċjali għandha tingħata meta d-dettalji tal-kont bankarju mniżżla fil-formola ma jkunux konformi ma' dawk imniżżla fil-kuntratt innifsu. (Għall aktar għajnuna ara **I-Istruzzjonijiet Speċifiċi**).

Għal aktar tagħrif dwar in-numru **IBAN**, l-applikant imhegġeġ jikkomunika mal-bank kummerċjali tiegħu.

IT-TIELET TAQSIMA [DIKJARAZZJONI]

Proċedura – L-applikant għandu jkun żgur li, dik il-persuna li timla u tiċċertifika l-formola, għandha kull setgħa li tagħmel dan.

Għaldaqstant, il-persuna li tiffirma din id-dikjarazzjoni għandha, flimkien ma' isimha, tindika il-pożizzjoni uffiċjali tagħha fin-negozju.

Nota: Il-formola ma tiġix ikkonsiderata valida jekk tasal lura d-Divizjoni tat-Teżor mingħajr **Firma tal-benefiċċjarju** jew mhux kompluta.

ISTRUZZJONIJIET SPEĊIFIĊI

F'każ li d-dettalji tal-kont bankarju ma jaqblux ma' dawk indikati fid-dokument tal-kuntratt, il-kuntrattur għandu minnufih jieh u l-passi kollha meħtieġa sabiex jirregola l-pożizzjoni tiegħu u jiżgura li kull tibdil fil-kundizzjonijiet tal-kuntratt jiġu approvati bil-miktub mingħand id-Dipartiment ikkonċernat.

Id-Divizjoni tat-Teżor ma tagħmilx ħlasijiet qabel tircievi l-kunsens mingħand id-Dipartiment ikkonċernat. Min jixtieq **Aktar tagħrif**, għandu jawniċina lid-Direttur Ġenerali fid-Dipartiment tal-Kuntratti.

AVVIŻ DWAR IL-PROTEZZJONI TAD-DATA

Id-Divizjoni qiegħda tikseb l-informazzjoni kollha meħtieġa sabiex jitwettaq l-ghan ta' din il-formola u jiżgura li din tintuża biss sabiex jiġu protetti fondi pubbliċi u ma jħallux li jsir frodi.

Id-Divizjoni tista' tivverifika kull informazzjoni mogħtija mill-applikant jew xi nformazzjoni oħra dwar l-applikant li tasal minn terzi persuni, ma' dik miżmuma minnu stess. L-istess informazzjoni tista' tingħatalhom sabiex din tiġi vverifikata u b'hekk jiġi evitat kull att kriminali skond ma tipprovdi l-liġi. Dawn it-terzi persuni jinkludu entitajiet governattivi kif ukoll awtoritajiet lokali.

Din id-Divizjoni tiżgura li ma tingħata ebda informazzjoni dwar l-applikant ħlief għal l-ghanijiet imsemmija hawn fuq skond kif tippermetti l-liġi. Min jixtieq jikseb aktar informazzjoni għandu jkteb lill-EU Funds Management Unit fi hdan id-Divizjoni tat-Teżor fl-indirizz hawn taht imsemmi.

Bank details

Please fill in the details needed for the payment to reach the account of the applicant.

Account details

Account holder			
Address			
Postcode		City	
Region		Country	

Contact

Family name (Ms/Mr)		First name	
Email			
Telephone		Telefax	

Bank details

Bank name			
Branch address			
Postcode		City	
Region		Country	
Account number			
IBAN ⁶			

Bank Stamp & Signature of Bank Representative (both obligatory)	Date & Signature of Account Holder / Legal representative (obligatory)

Remarks

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⁶If the IBAN Code (International Bank Account Number) is applied in the country where your bank is situated.