## **TOURIST BUS PL**

## Substitute Statement Affidavit (art. 47 del D.P.R del 28 dicembre 2000, n. 445)

mobilità				
ROMA 🖏	Bus Fleet			
SURNAME		GIVEN NAME		
				IRTH//
ADDRESS			CITY	
COUNTRY				_ ZIP CODE
TELEPHONE NUMBER		E-MAIL		
TAX CODE				
ID DOCUMENT NUMBER		ISSUED BY		
REGISTERED OFFICE OF TH	IE LEGAL REPRESENTATIVE OF	F THE COMPANY		
CITY				
ADDRESS				N
ZIP CODE	TELEPHONE NUMBER		FAX/MOBILE	
PEC ADDRESS				
TAX CODE		VAT NUMBER		
		STATE		
	FOR THE PURPOSES	OF INCLUSION IN THE	RSM DATABASE	
	NEW BUS BUS REPLACEMENT			
Plate	* Fuel Type	Pollution Parameter	Length	Running Board YES/NO
confirms that all the foregoing is tru	minal and civil liability provided under A ue. The undersigned will promptly inform to have purchased the bus by public sub-	m Roma Servizi per la Mobilità s.r.l. o	f any variations / changes to th	e stated contents.

Documents to attach					
• Copy of the registration book					
Copy of the warrant					
• copy of an ID document					
Rome, date	Firma				
The undersigned (GDPR 2016/679) lends consent for processing of personal data exclusively by jurisdiction of Rome Servizi per la Mobilità s.r.l.					
Rome, date	Firma				
Statement that is free of Authentic Signature (art. 21 comma 1 e art. 38, co dicembre 2000 n 445)	omma 3 del D.P.R. 28 dicembre 2000, n. 445) Statement that is free of stamp duty (art.37 del D.P.R. 28				
* Select the fuel type from the following: - petrol, diesel, electric hybrid, LPG, methane, - bi-fuel (petrol-LPG-methane gas)					