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# SUPPLEMENTARY DECLARATION OF HONOUR

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Inp	ut	Fi	elds marked with an	are compuls
Infor	mation about the appl	licant		
First name*:				
Surname*:				
Socia	l security number:			
Date of birth*:				
here	by declare that during	g three years preceding today:		
	hidden, in a company / I, alone or jointly with r	ave held a remunerated management position as a manager, formally appointed or de fa dden, in a company / the following companies (please specify in the table hereinafter); or lone or jointly with my spouse, partner or with a third party, have held, directly or indirec ares / interests in the following company / the following companies (please specify in the ave been able to influence significantly the management of the following company / the f ease specify in the table hereinafter). mpany(ies) concerned by the above point(s) *:		
	I have been able to influ (please specify in the ta	uence significantly the management of the following compa able hereinafter).	fy in the table here	
	I have been able to influ (please specify in the ta	uence significantly the management of the following compa able hereinafter).	fy in the table here	

For any questions regarding the content of the form, please contact the following telephone number: (+352) 247 74700



# 2. Supporting documents

Fields marked with an \* are compulsory

#### Please join the following document:

a copy of your passport or ID\*

# 3. Validation

Fields marked with an \* are compulsory

#### By signing this document you confirm that the information entered on this form is true and accurate

We only use the data collected in this document to process your request for a business permit. Other authorities may also access this data in as far as a law or implementing regulations grant them such power. You have the right to access, rectify and demand erasure of your personal data as required by the law of 2 August 2002 on

the protection or personal data and the General Data Protection Regulation (EU) 2016/679.

You may direct your enquiries related to data protection issues directly to the department indicated in the header.

### 4. Signature

Fields marked with an \* are compulsory

City :	Applicant's handwritten
	signature *:
	_ (or digital signature)
Date of application *:	

### 5. Submission by post

Send the completed and signed document, along with the required supporting documents, by post to the following address:

Ministère de l'Économie Service des autorisations d'établissement 19-21, boulevard Royal, L-2449 Luxembourg BP 535, L-2937 Luxembourg

### 6. Submission by e-mail

Send the completed and signed document, along with the required supporting documents, by e-mail to the following address:

#### info.pme@eco.etat.lu

A new business permit application will however only be accepted via MyGuichet.lu or by post.

For any questions regarding the content of the form, please contact the following telephone number: (+352) 247 74700