###### Söz. Ek-5: Standart Formlar ve Diğer Gerekli Belgeler

**MALİ KİMLİK FORMU (Söz. EK: 5a)**



**TÜZEL KİMLİK FORMU (Söz. EK: 5b)**

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| **GERÇEK KİŞİ** |

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| İLK İSİM |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 2. İSİM |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 3. İSİM |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| RESMİ ADRESİ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| ŞEHİR |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| T.C. KİMLİK NUMARASI |  |  |  |  |  |  |  |  |  |  |  |  |
| VERGİ NUMARASI |  |  |  |  |  |  |  |  |  |  |  |  |

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| VERGİ DAİRESİ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| KİMLİK BELGESİ TÜRÜ: | | | | NÜFUS KAĞIDI | | | |  | EHLİYET | | | |  | PASAPORT | | | | |  |
| KİMLİK BELGESİ NO: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
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| DOĞUM TARİHİ |  |  |  |  |  |  |  |  |  |  |
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| DOĞUM YERİ- İL |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DOĞUM YERİ- ÜLKE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| TELEFON |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FAKS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| E-POSTA |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| BU “TÜZEL KİŞİLİK BELGESİ” DOLDURULMALI VE KİMLİK BELGESİNİN OKUNUR BİR FOTOKOPİSİYLE BİRLİKTE VERİLMELİDİR. |

TARİH VE İMZA

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| **TÜZEL KİMLİK FORMU (Söz. EK: 5b)** | | | | | | | | | | | | | | | | | | | | | | | | |
| **KAMU KURUM/KURULUŞLARI** | | | | | | | | | | | | | | | | | | | | | | | | |
| TÜRÜ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| STK (Sivil Toplum Kuruluşu) | EVET |  |  | HAYIR |  |  |

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| İSİM(LER) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| KISALTMA |  |  |  |  |  |  |  |  |  |  |

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| RESMİ ADRESİ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Bu “Tüzel kişilik belgesi” doldurulmalı ve aşağıdakilerle birlikte verilmelidir:   * tüzel kişiliğin kuruluşuna dair karar, kararname veya kanunun bir kopyası * eğer bu mümkün olmazsa, tüzel kişiliğin kuruluşunu belirten başka bir resmi doküman |

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| TARİH |  | DAMGA |
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| YETKİLİ TEMSİLCİNİN ADI VE GÖREVİ |
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| İMZA |

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| **TÜZEL KİMLİK FORMU (Söz. EK: 5b)** | | | | | | | | | | | | | | | | | | | | | | | | |
| **ÖZEL KURUM/KURULUŞLAR** | | | | | | | | | | | | | | | | | | | | | | | | |
| TÜRÜ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| GENEL MERKEZ RESMİ ADRESİ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| BU “TÜZEL KİŞİLİK BELGESİ” DOLDURULMALI VE AŞAĞIDAKİLERLE BİRLİKTE VERİLMELİDİR:   * SÖZLEŞME TARAFININ İSİM, ADRES VE ULUSAL OTORİTELER TARAFINDAN VERİLEN KAYIT NUMARASINI GÖSTEREN RESMİ DOKÜMANIN BİR KOPYASI (ÖRNEĞİN; RESMİ GAZETE, ŞİRKETLERİN KAYDI VB.) * YUKARIDA DEĞİNİLEN RESMİ DOKÜMANDA BELİRTİLMEMİŞSE VE DE MÜMKÜNSE VERGİ KAYDININ BİR KOPYASI |

TARİH VE İMZA

**KİLİT PERSONELİN MESLEKİ DENEYİMİ Söz. Ek-5c**

**ÖZGEÇMİŞ**

(Azami 3 sayfa + 3 sayfa ek)

**Sözleşmede önerilen pozisyon:**

1. Soyadı:

2. Adı:

3. Doğum yeri ve tarihi:

4. Tabiyeti:

5. Medeni durumu:

Adres (telefon/faks/e-posta):

6. Eğitim:

|  |  |
| --- | --- |
| *Eğitim Kurumlaır:* |  |
| *Tarih:*  *(ay/yıl) tarihinden*  *(ay/yıl) tarihine kadar* |  |
| *Derece:* |  |

7. Yabancı Dil

(1’den 5’e kadar bir ölçeğe göre, 5 en iyi):

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| *Dil* | *Okuma* | *Konuşma* | *Yazma* |
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8. Mesleki kurumlara üyeliği:

9. Diğer yetenekler (mesela bilgisayar bilgisi, vb.):

10. Mevcut pozisyon:

11. Mesleki deneyim süresi:

12. Kilit özellikleri:

13. Bölgesel deneyimi:

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| --- | --- | --- |
| *Ülke/Bölge/Şehir* | *Tarih: (ay/yıl) tarihinden (ay/yıl) tarihine kadar)* | *Projenin adı ve kısa tanımı* |
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14. Mesleki deneyim:

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| *Tarih: (ay/yıl) tarihinden (ay/yıl) tarihine kadar* |  |
| Yer |  |
| Şirket/kurum |  |
| Pozisyon |  |
| İş tanımı |  |

15. Diğerleri:

15a. Yayınlar ve seminerler:

1. 15b. Referanslar:

İmza ....................................................

(*istekli adına imza atmaya yetkili kişi ya da kişiler*)

Tarih ............................................

**ORTAK GİRİŞİMLER HAKKINDA BİLGİ Söz. Ek-5e**

*(İhaleye ortak girişim ya da konsorsiyum olarak teklif sunulacaksa istekli bu formu dolduracaktır*.)

|  |
| --- |
| **1** Adı ...................................................................................... |
| **2** Yönetim kurulunun adresi ..................................................  ..................................................................................................  Teleks ..........................................................  Telefon .........................Faks ..................................E-posta ..... |
| **3** Sözleşme Makamının bulunduğu devletteki temsilcisi, eğer varsa (yabancı bir lider ortağı olan ortak girişim / konsorsiyumlar için)  Ofis adresi ...........................................................................  ..................................................................................................  Teleks ..........................................................  Telefon ..............................Faks ......................................... |
| **4** Ortakların isimleri  i) ..............................................................................................  ii) ..............................................................................................  iii) ..............................................................................................  vb. ............................................................................................ |
| **5** Lider ortağın adı  ..................................................................................................  .................................................................................................. |
| **6** Ortak girişim/konsorsiyumun oluşumu ile ilgili anlaşma  i) İmza tarihi: ................................................................  ii) Yeri: ...................................................................................  iii) Ek – ortak girişim / konsorsiyum sözleşmesi |
| **7** Ortakların her biri tarafından yapılacak işlerin türü de belirtilerek ortaklar arasında önerilen iş bölümü (% olarak)  ..................................................................................................  ..................................................................................................  ..................................................................................................  ..................................................................................................  .................................................................................................. |
|  |

*İmza ....................................................*

*(istekli adına imza atmaya yetkili kişi ya da kişiler*)

Tarih ............................................