**Zahtjev za dodjelu potpore mikro poduzetnicima i obrtnicima (Z/1)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **1.** | Potpora za: | **Očuvanje radnih mjesta kod poslodavaca kojima je radi epidemije bolesti COVID-19 naložena privremena obustava rada** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2.** | Naziv podnositelja prijave |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3.** | Adresa sjedišta podnositelja |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.** | Oblik registracije  (d.o.o., j.d.o.o., obrt, zadruga) |  | | | | | | | | | | | | | | | | | **5.** | | Datum osnivanja | | | | | | | | | | | |  | | | | | | | | | |
| **6.** | Matični broj **(MB)** |  | |  | | |  | |  | |  | |  | |  | |  | | **OIB** | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| **7.** | Telefon / Telefax |  | | | | | | | | | | | | | | | | | E-mail | | | |  | | | | | | | | | | | | | | | | | | | |
| **8.** | Ime, prezime i datum rođenja vlasnika (osnivača) subjekta |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **9.** | Poslovna banka |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **10.** | IBAN | **H** | **R** | |  |  | |  | |  | |  | |  | |  |  |  | |  |  |  | |  | |  | |  | |  | |  |  |  | |  | |  | |  |  |  |
| **11.** | Broj zaposlenih | **UKUPNO:** | | | | | | | | | | | | | | | **u 2019. godini** | | | | | | | | | | | | | **u 2020. godini** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | |
| **12.** | Djelatnost prema NKD |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **13.** | Traženi iznos potpore (u kn) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **14.** | Kratki opis – razlog zbog čega se traži potpora (privremena obustava rada) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **15.** | Namjena sredstava za koje se traži potpora (kratki opis) |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Mjesto i datum: **M.P.** Podnositelj zahtjeva:

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