

01/07/2022

Split Payment Form

Subject: Split Payment VAT Regime

Dear Sirs,

in order to accomplish the obligations provided by the art. 17-ter of the Italian D.P.R. no. 633/72 (as subsequently amended and implemented), the subscriber _____ (legal representative or duly authorized representative), assuming any greater responsibility on the veracity of the declarations and statements below and undertaking to communicate any change in the VAT regime, on behalf of _____ (Company name and legal form), with registered office at _____ (city), _____ (address), Fiscal Code and VAT no. _____ (hereinafter, the "Client") ,

DECLARES THAT

- is subject to the "Split Payment" VAT regime
- is not subject to the "Split Payment" VAT regime

(Place, Date)

(Signature of the legal representative or duly authorized representative)