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| FORMULAR DEKLARIMI KONFLIKT INTERESI  ***Shtojcë për tu paraqitur nga Operatori Ekonomik***  Deklaruesi: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Subjekti Perfaqesues: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Pozicioni ne subjekt: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  NUK KAM KONFLIKT INTERESI   * Nuk kam asnjë konflikt aktual, potencial apo të perceptuar interesi në lidhje me këtë procedure prokurimi, si dhe me subjektin / individet oferte kerkues ALBICT.   KAM KONFLIKT INTERESI   * Kam konflikt interesi.   Përshkruani rrethanat që shkaktojnë konfliktin e interesit:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  1. Kam lexuar dhe jam informual lidhur me Politikat e shmangies së Konfliktit të Interesit te ALBICT;  2. Jam dakord të respektoj politikën;  3. Nuk kam konflikte aktuale ose të mundshme siç përcaktohen nga politika ose nëse kam, i kam zbuluar më parë siç kërkohet nga politika ose po i detajoj më poshtë.  Detajoj këtu, sipas njohurive më të mira:  1. çdo subjekt në të cilin ju merrni pjesë (si drejtor, menaxher, punonjës, pronar ose anëtar) me të cilin ALBICT ka një marrëdhënie;  2. çdo transaksion në të cilin ALBICT është pjesëmarrës me të cilin ju mund të keni një konflikt interesi;  3. çdo situatë tjetër që mund të përbëjë konflikt interesi.  Unë nënshkruesi \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (emër,atësi,mbiemër)    **Datë \_\_\_/\_\_\_/2025** | CONFLICT OF INTEREST DECLARATION FORM  ***Addendum to be submitted by the Economic Operator***  The declarant: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Representative Entity: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Job position in the entity: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  I HAVE NO CONFLICT OF INTEREST   * I have no actual, potential or perceived conflict of interest in relation to this procurement procedure, as well as to the subject/individuals requesting the ALBICT offer.   I HAVE A CONFLICT OF INTEREST   * I have a conflict of interest.   Describe the circumstances that cause the conflict of interest:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  By signing below, I affirm that:  1. I have read and am informed about the Conflict-of-Interest Avoidance Policy of ALBICT;  2. I agree to abide by the policy;  3. I have no actual or potential conflicts as defined by the policy or if I have, I have previously disclosed them as required by the policy or am detailing them below.  I detail here, to the best of my knowledge:  1. any entity in which you participate (as a director, manager, employee, owner or member) with which ALBICT has a relationship.  2. any transaction in which ALBICT is a participant with which you may have a conflict of interest.  3. any other situation that may constitute a conflict of interest.  I, the signatory \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (name, father, last name)    **Datë \_\_/\_\_\_/2025** |