

**CORRIGENDA**

**Corrigendum to Commission Delegated Regulation (EU) 2016/341 of 17 December 2015 supplementing Regulation (EU) No 952/2013 of the European Parliament and of the Council as regards transitional rules for certain provisions of the Union Customs Code where the relevant electronic systems are not yet operational and amending Delegated Regulation (EU) 2015/2446**

*(Official Journal of the European Union L 69 of 15 March 2016)*

On page 39, Annexes 2, 3, 4 and 5 are replaced as follows:

## ANNEX 2

## EUROPEAN UNION

## APPLICATION FOR BINDING TARIFF INFORMATION (BTI)

<p><b>1. Applicant (full name and address)</b></p> <p>Telephone number:</p> <p>Fax number:</p> <p>Customs ID/EORI No:</p>	<p><b>For Official use</b></p> <p>Registration Number:</p> <p>Place of Receipt:</p> <p>Date of Receipt:</p> <p>Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>    Month <input type="text"/> <input type="text"/>    Day <input type="text"/> <input type="text"/></p> <p>BTI Application language:</p> <p>Images to be scanned:</p> <p>Yes <input type="checkbox"/>    # ...    No <input type="checkbox"/></p> <p>Date of issue:</p> <p>Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>    Month <input type="text"/> <input type="text"/>    Day <input type="text"/> <input type="text"/></p> <p>Issuing officer: .....</p> <p>All Samples returned: <input type="checkbox"/></p>
<p><b>2. Holder (full name and address)</b></p> <p>(Confidential)</p> <p>Telephone number:</p> <p>Fax number:</p> <p>Customs ID/EORI No:</p>	<p><b>Important note</b></p> <p>By signing the declaration, the applicant accepts responsibility for the accuracy and completeness of the particulars given on this form and on any continuation sheet(s) lodged with it. The applicant accepts that this information and any photograph(s), sketch(es), brochure(s) etc. can be stored on a database of the European Commission and that the data, including any photograph(s), sketch(es), brochure(s) etc., submitted with the application or obtained (or obtainable) by the administration, and which have not been marked in boxes 2 and 9 of the application as being confidential can be disclosed to the public via the internet.</p>
<p><b>3. Agent or Representative (full name and address)</b></p> <p>Telephone number:</p> <p>Fax number:</p> <p>Customs ID/EORI No:</p>	<p><b>4. Reissue of a BTI</b></p> <p>If you are applying for the reissue of a BTI, please complete this box.</p> <p>BTI Reference Number:</p> <p>Valid from:</p> <p>Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>    Month <input type="text"/> <input type="text"/>    Day <input type="text"/> <input type="text"/></p> <p>Nomenclature Code: .....</p>
<p><b>5. Customs Nomenclature</b></p> <p>Please indicate in which nomenclature the goods are to be classified:</p> <p><input type="checkbox"/> Harmonized System (HS)</p> <p><input type="checkbox"/> Combined Nomenclature (CN)</p> <p><input type="checkbox"/> TARIC</p> <p><input type="checkbox"/> Refund nomenclature</p> <p><input type="checkbox"/> Other (Specify): .....</p>	<p><b>6. Type of transaction</b></p> <p>Does this application relate to an import or export actually envisaged?</p> <p>Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <hr/> <p><b>7. Classification envisaged</b></p> <p>Please indicate where in your view the goods are classified.</p> <p>Nomenclature Code: .....</p>
<p><b>8. Description of goods</b></p> <p>Include where necessary the precise composition of the goods, the method of analysis used, the type of manufacturing process undergone, the value including the components, the use of the goods, the usual trade name and where appropriate, the packaging for retail sale in the case of sets of goods (Please use a separate sheet if more space is required).</p>	


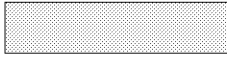

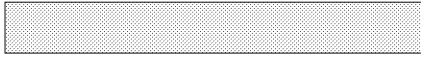






<b>9. Commercial denomination and additional information (*)</b> <span style="float: right;">(Confidential)</span>	
<b>10. Samples etc.</b> Please indicate which if any of the following are enclosed with your application. Description <input type="checkbox"/> Brochures <input type="checkbox"/> Photographs <input type="checkbox"/> Samples <input type="checkbox"/> Other Do you wish your samples to be returned? Yes <input type="checkbox"/> No <input type="checkbox"/> Special costs incurred by the Customs authorities as a result of analysis, expert reports or the return of samples, may be charged to the applicant.	
<b>11. Other BTI Applications (*) and other BTI held (*)</b> Please indicate if you have applied for, or been issued with BTI for identical or similar goods at other Customs offices or in other Member States. Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details and enclose a photocopy of the BTI:	
Country of Application: Place of Application: Date of Application: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> BTI Reference: Date of Start of Validity: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Nomenclature Code:	Country of Application: Place of Application: Date of Application: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> BTI Reference: Date of Start of Validity: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Nomenclature Code:
<b>12. BTI issued to other Holders (*)</b> Please indicate if you are aware of BTI for identical or similar products already issued to other holders. Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details:	
Issuing country: BTI Reference: Date of Start of Validity: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Nomenclature Code:	Issuing country: BTI Reference: Date of Start of Validity: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Nomenclature Code:
<b>13. Date and Signature</b> Your reference: Date: Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Day <input type="text"/> <input type="text"/> Signature:	
<b>For Official Use:</b>          	

(\*) Please use a separate sheet of paper if more space is required.

## ANNEX 3



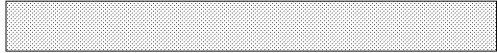


## EUROPEAN UNION — BINDING TARIFF INFORMATION DECISION

BTI

COPY FOR HOLDER	1	<b>1. Competent customs authority</b>	<b>2. BTI reference</b> 
		<b>3. Holder (name and address)</b> confidential	<b>4. Date of start of validity</b> 
		<p><b>Important notice</b></p> <p>Without prejudice to the provisions of Article 34(4) and (5) of Regulation (EC) No 952/2013 of the European Parliament and the Council this BTI remains valid for 3 years as from the date of start of validity.</p> <p>The information supplied will be stored on a database of the European Commission for the purpose of the application of Commission Implementing Regulation (EU) 2015/2447 and the data of the BTI, including any photograph(s), image(s), brochure(s) etc., but with the exception of the information contained in boxes 3 and 8, may be disclosed to the public via the internet.</p>	<b>5. Data and reference of the application</b>   <b>6. Classification of the goods in the customs nomenclature</b>   
1	The holder shall have the right to appeal against this BTI.		
<b>7. Description of goods</b>			
<b>8. Commercial denomination and additional information</b> confidential			
<b>9. Justification of the classification of the goods</b>			
<b>10. This BTI decision has been issued on the basis of the following material provided by the applicant</b>			
Description  Brochures  Photos  Samples  Other 			
Place:		Signature	
Date:		Stamp	











## EUROPEAN UNION — BINDING TARIFF INFORMATION DECISION

BTI

2	1. <b>Competent customs authority</b>	2. <b>BTI reference</b> 
COPY FOR COMMISSION	3. <b>Holder (name and address)</b> confidential	4. <b>Date of start of validity</b> 
	<b>Important notice</b> Without prejudice to the provisions of Article 34(4) and (5) of Regulation (EC) No 952/2013 of the European Parliament and the Council this BTI remains valid for 3 years as from the date of start of validity.  The information supplied will be stored on a database of the European Commission for the purpose of the application of Commission Implementing Regulation (EU) 2015/2447 and the data of the BTI, including any photograph(s), image(s), brochure(s) etc., but with the exception of the information contained in boxes 3 and 8, may be disclosed to the public via the internet.	5. <b>Data and reference of the application</b> 
2	The holder shall have the right to appeal against this BTI.	6. <b>Classification of the goods in the customs nomenclature</b>  
7. <b>Description of goods</b>		
8. <b>Commercial denomination and additional information</b> confidential		
9. <b>Justification of the classification of the goods</b>		
10. <b>This BTI decision has been issued on the basis of the following material provided by the applicant</b>  Description <input type="checkbox"/> Brochures <input type="checkbox"/> Photos <input type="checkbox"/> Samples <input type="checkbox"/> Other <input type="checkbox"/>  Place: _____ Signature _____ Date: _____ Stamp _____		

## EUROPEAN UNION — BINDING TARIFF INFORMATION DECISION

BTI

COPY FOR MEMBER STATE	3	1. <b>Competent customs authority</b>	2. <b>BTI reference</b> 
		3. <b>Holder (name and address)</b> confidential	4. <b>Date of start of validity</b> 
		<b>Important notice</b> Without prejudice to the provisions of Article 34(4) and (5) of Regulation (EC) No 952/2013 of the European Parliament and the Council this BTI remains valid for 3 years as from the date of start of validity. The information supplied will be stored on a database of the European Commission for the purpose of the application of Commission Implementing Regulation (EU) 2015/2447 and the data of the BTI, including any photograph(s), image(s), brochure(s) etc., but with the exception of the information contained in boxes 3 and 8, may be disclosed to the public via the internet.	5. <b>Data and reference of the application</b> 
			6. <b>Classification of the goods in the customs nomenclature</b>  
	3	The holder shall have the right to appeal against this BTI.	
		7. <b>Description of goods</b>	
		8. <b>Commercial denomination and additional information</b> confidential	
		9. <b>Justification of the classification of the goods</b>	
		10. <b>This BTI decision has been issued on the basis of the following material provided by the applicant</b>	
		Description  Brochures  Photos  Samples  Other 	
		Place:	Signature
		Date:	Stamp

EUROPEAN UNION — BINDING TARIFF INFORMATION DECISION

BTI

COPY FOR COMMISSION	<p>4 11. Competent customs authority to be contacted for additional information (name, full address, telephone, telefax)</p>	<p>12. BTI reference</p> <div style="border: 1px solid black; height: 20px; width: 100%; background-color: #cccccc;"></div>																																																
	4		<p>13. Language</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td>bg</td><td><input type="checkbox"/></td> <td>fi</td><td><input type="checkbox"/></td> <td>nl</td><td><input type="checkbox"/></td> </tr> <tr> <td>cs</td><td><input type="checkbox"/></td> <td>fr</td><td><input type="checkbox"/></td> <td>pl</td><td><input type="checkbox"/></td> </tr> <tr> <td>da</td><td><input type="checkbox"/></td> <td>hr</td><td><input type="checkbox"/></td> <td>pt</td><td><input type="checkbox"/></td> </tr> <tr> <td>de</td><td><input type="checkbox"/></td> <td>hu</td><td><input type="checkbox"/></td> <td>ro</td><td><input type="checkbox"/></td> </tr> <tr> <td>el</td><td><input type="checkbox"/></td> <td>it</td><td><input type="checkbox"/></td> <td>sk</td><td><input type="checkbox"/></td> </tr> <tr> <td>en</td><td><input type="checkbox"/></td> <td>lt</td><td><input type="checkbox"/></td> <td>sl</td><td><input type="checkbox"/></td> </tr> <tr> <td>es</td><td><input type="checkbox"/></td> <td>lv</td><td><input type="checkbox"/></td> <td>sv</td><td><input type="checkbox"/></td> </tr> <tr> <td>et</td><td><input type="checkbox"/></td> <td>mt</td><td><input type="checkbox"/></td> <td></td><td></td> </tr> </table>	bg	<input type="checkbox"/>	fi	<input type="checkbox"/>	nl	<input type="checkbox"/>	cs	<input type="checkbox"/>	fr	<input type="checkbox"/>	pl	<input type="checkbox"/>	da	<input type="checkbox"/>	hr	<input type="checkbox"/>	pt	<input type="checkbox"/>	de	<input type="checkbox"/>	hu	<input type="checkbox"/>	ro	<input type="checkbox"/>	el	<input type="checkbox"/>	it	<input type="checkbox"/>	sk	<input type="checkbox"/>	en	<input type="checkbox"/>	lt	<input type="checkbox"/>	sl	<input type="checkbox"/>	es	<input type="checkbox"/>	lv	<input type="checkbox"/>	sv	<input type="checkbox"/>	et	<input type="checkbox"/>	mt	<input type="checkbox"/>	
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## EUROPEAN UNION – BINDING TARIFF INFORMATION DECISION

BTI

5	11. Competent customs authority to be contacted for additional information	12. BTI reference																																															
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ANNEX 4

EUROPEAN UNION

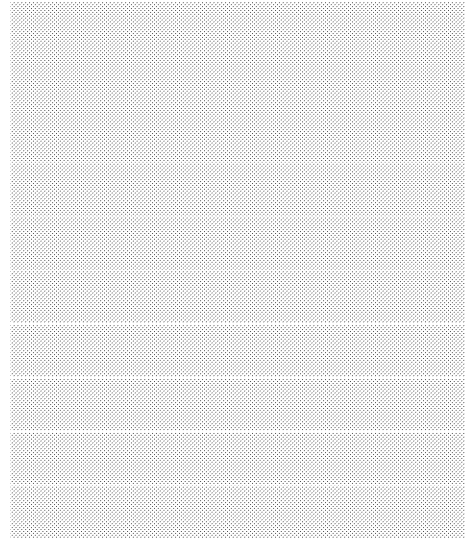
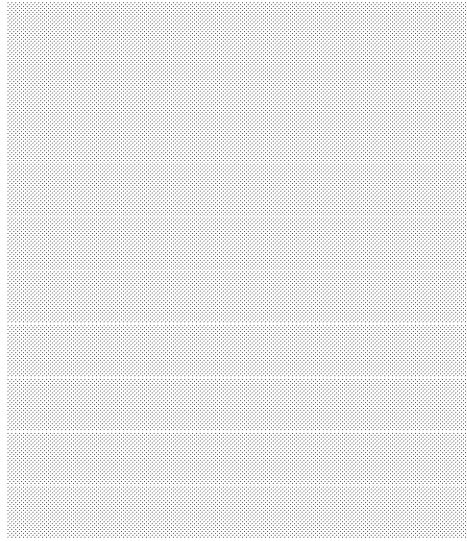
APPLICATION FOR BINDING TARIFF INFORMATION (BTI) DECISION

<p><b>1. Applicant</b> (mandatory)</p> <p>Name: (confidential)</p> <p>Street and number:</p> <p>Country: <input type="text"/></p> <p>Postcode: <input type="text"/></p> <p>City:</p> <p><b>Applicant identification:</b> EORI No: <input type="text"/></p>	<p><b>For official use</b></p> <p>Registration Number: <input type="text"/></p> <p>National reference number (if any):</p> <p>Place of receipt:</p> <p>Date of receipt: Year <input type="text"/> Month <input type="text"/> Day <input type="text"/></p> <p>Status of the application: <input type="text"/></p>
<p><b>2. Place where main accounts for customs purposes are held or accessible</b> (if different from above)</p> <p>Street and number:</p> <p>Country: <input type="text"/></p> <p>Postcode: <input type="text"/></p> <p>City:</p>	<p><b>6. Type of transaction</b> (mandatory)</p> <p>Please indicate whether you intend to use the BTI decision resulting from this application for one of the following customs procedures:</p> <p>Release for free circulation Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Special procedures Yes <input type="checkbox"/> No <input type="checkbox"/> (Specify) .....</p> <p>Export Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>3. Customs representative</b> (if any)</p> <p>Name:</p> <p>Street and number:</p> <p>Country: <input type="text"/></p> <p>Postcode: <input type="text"/></p> <p>City:</p> <p><b>Representative identification:</b> EORI No: <input type="text"/></p>	<p><b>7. Customs Nomenclature</b> (mandatory)</p> <p>Please indicate in which nomenclature the goods are to be classified:</p> <p><input type="checkbox"/> Combined Nomenclature (CN)</p> <p><input type="checkbox"/> TARIC</p> <p><input type="checkbox"/> Refund nomenclature</p> <p><input type="checkbox"/> Other (Specify): .....</p>
<p><b>4. Contact person responsible for the application</b> (mandatory)</p> <p>Name:</p> <p>Telephone Number:</p> <p>Fax Number:</p> <p>E-mail address:</p> <p><b>5. Reissue of a BTI decision</b> (mandatory)</p> <p>Indicate whether the application concerns the reissue of a BTI decision.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, provide the relevant details.</p> <p>BTI Decision Reference number: .....</p> <p>Valid from: Year <input type="text"/> Month <input type="text"/> Day <input type="text"/></p> <p>Commodity Code: .....</p>	<p><b>8. Commodity code</b></p> <p>Indicate the customs nomenclature code under which the applicant expects the goods to be classified.</p> <p><input type="text"/></p>
<p><b>9. Description of goods</b> (mandatory)</p> <p>Detailed description of the goods permitting their identification and the determination of their classification in the customs nomenclature. This should also include details of the composition of the goods and any methods of examination used for its determination where the classification depends on it. Any details which the applicant considers to be confidential should be entered in 8. Commercial denomination and additional information.</p>	

<p><b>10. Commercial denomination and additional information (*)</b> (confidential)</p> <p>Indicate any particulars which the applicant wishes to be treated as confidential, including the trademark and model number of the goods.</p>			
<p><b>11. Samples etc.</b></p> <p>Indicate whether any samples, photographs, brochures or other documents available which may assist the customs authorities in determining the correct classification of the customs nomenclature, are attached as annexes.</p> <p>Samples <input type="checkbox"/>                      Photographs <input type="checkbox"/>                      Brochures <input type="checkbox"/>                      Other <input type="checkbox"/></p> <p>Do you wish your samples to be returned? Yes <input type="checkbox"/>                      No <input type="checkbox"/></p> <p>Special costs incurred by the Customs authorities as a result of analysis, expert reports or the return of samples, may be charged to the applicant.</p>			
<p><b>12. Other BTI Applications and other BTI held</b></p> <p>Please indicate if you have applied for, or been issued with, BTIs for identical or similar goods at other Customs offices or in other Member States.</p> <p>Yes <input type="checkbox"/>                      No <input type="checkbox"/></p> <p>If yes, please give details:</p> <table border="0"> <tr> <td style="vertical-align: top;"> <p>Country of Application: <input type="checkbox"/><input type="checkbox"/></p> <p>Place of Application:</p> <p>Date of Application: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>BTI Decision Reference number: Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p> </td> <td style="vertical-align: top;"> <p>Country of Application: <input type="checkbox"/><input type="checkbox"/></p> <p>Place of Application:</p> <p>Date of Application: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>BTI Decision Reference Number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p> </td> </tr> </table>		<p>Country of Application: <input type="checkbox"/><input type="checkbox"/></p> <p>Place of Application:</p> <p>Date of Application: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>BTI Decision Reference number: Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p>	<p>Country of Application: <input type="checkbox"/><input type="checkbox"/></p> <p>Place of Application:</p> <p>Date of Application: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>BTI Decision Reference Number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p>
<p>Country of Application: <input type="checkbox"/><input type="checkbox"/></p> <p>Place of Application:</p> <p>Date of Application: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>BTI Decision Reference number: Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p>	<p>Country of Application: <input type="checkbox"/><input type="checkbox"/></p> <p>Place of Application:</p> <p>Date of Application: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>BTI Decision Reference Number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p>		
<p><b>13. BTI decisions issued to other Holders</b> (mandatory)</p> <p>Please indicate if you are aware of BTIs for identical or similar goods already issues to other holders.</p> <p>Yes <input type="checkbox"/>                      No <input type="checkbox"/></p> <p>If yes, please give details:</p> <table border="0"> <tr> <td style="vertical-align: top;"> <p>BTI Decision Reference number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p> </td> <td style="vertical-align: top;"> <p>BTI Decision Reference number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p> </td> </tr> </table>		<p>BTI Decision Reference number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p>	<p>BTI Decision Reference number:</p> <p>Start date of the decision: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Commodity Code:</p>
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<p><b>14. Are you aware of any legal or administrative proceedings concerning tariff classification pending within the EU, or a court ruling on tariff classification already handed down within the EU, relating to the goods described in boxes 9 and 10?</b> (mandatory)</p> <p>Yes <input type="checkbox"/>                      No <input type="checkbox"/></p> <p>If yes, please give details:</p> <p>Country: <input type="checkbox"/><input type="checkbox"/></p> <p>Name of the court:</p> <p>Address of the court:</p> <p>Reference number of the case:</p>			
<p><b>15. Date and Authentication</b> (mandatory)</p> <p>Date: Year <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>    Month <input type="checkbox"/><input type="checkbox"/>    Day <input type="checkbox"/><input type="checkbox"/></p> <p>Signature:</p> <p style="text-align: center;"><b>Important note</b></p> <p>By authenticating this application, the applicant accepts responsibility for the accuracy and completeness of the data contained in it, as well as for any additional information provided with it. The applicant accepts that these data and any photograph(s), image(s), brochure(s), etc. can be stored on a database of the European Commission and that the data, including any photograph(s), image(s), brochure(s), etc., submitted with this application or obtained (or obtainable) by the administration, and which have not been marked under data elements No 1, 2 and 8 of this application as being confidential shall be disclosed to the public via the internet.</p>			
<p><b>16. Additional information</b></p>			



**11. Keywords:**



**12. Images**