APPLICATION FORM OF APREN'S MEMBER

1. IDENTIFICATION				
COMPANY NAME OR SINGLE NAME:				
ADDRESS:			VAT Nº:	
POSTAL CODE:			CITY/COUNTRY:	
TELEPHONE:				
WEBSITE:	www.		E-MAIL:	
2. ADMISSION REQUIREMENTS				

MEMBER CATEGORY	OPTION	PLACE AN "X" ON THE CHOSEN OPTION
Power plant owner	А	Fill frame I if you chose this option
Have CRT (capacity reserve title)	В	Fill frame I if you chose this option
Prosumer	С	Fill frame I if you chose this option
Company without a Power Plant	D	Fill frame II if you chose this option
Individual	E	Skip to point 3

FRAME I

OPTIONS	POWER PLANT DESIGNATION	STARTED OPERATING IN month/year	MUNICIPALITY	LICENSED POWER (kW)	INSTALLED CAPACITY (kW)	RESOURCES (Technology)
A						
A						
Α						
А						
A						
В						
В						
В						
В						
В						
С						
С						
С						

If this table isn't enough, you can attach the information to this application form

FRAME II

Category	Employees	Business Volume	Balance	un. Quota	Place an "X" in the category your company fits
Individuals	-	-	-	1	
Micro enterprises	≤ 10	≤ 2 milions	≤ 2 millions	2	
Small Businesses	≤ 50	≤ 10 millions	≤ 10 millions	3	
Medium-sized enterprises	≤ 250	≤ 50 millions	≤ 43 millions	5	
Large companies	≥ 251	≥ 51 millions	≥ 44 millions	10	

	I	1		
Company's activity	Condens*.	Place an "X " in the right option	I an advisoration of	
framework :	Services*:	Place an X in the right option	Industry:	
rramework :				

^{*} Includes Research and Development, Academy, Associations, others ...



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3. CONTACT INFORMATION

LEGAL REPRESENTATIVE I	DATA			
NAME:		E-MAIL:	F	PHONE:
TITLE/POSITION:				
All information will be made availab	ble to the legal representative and will be the contact person	for APREN		
BILLING RESPONSIBLE DA	TA			
NAME:		E-MAIL:		PHONE
Whoever is responsible will be aske	d for all information related to invoices and sending them via	email, if different from the legal re	presentative	
RESPONSIBLE FOR THE TE	CHNICAL DATA			
NAME:		E-MAIL:		PHONE
Whoever is responsible will be aske	d for all technical information, if different from the legal repr	resentative		
HEAD OF COMMUNICATI	ON			
NAME:		E-MAIL:		PHONE
Whoever is responsible will be aske	d for all information related to communication and events, if	different from the legal representat	tive	
OTHER CONTACTS				
Summary of the Daily Writt	en Press (Clipping) Other people in the company who	wish to receive it (up to 2)		
NAME:		E-MAIL:		
NAME:		E-MAIL:		
NEWSLETTER Other people in	the company who wish to receive it (up to 2)			
NAME:		E-MAIL:		
NAME:		E-MAIL:		
We declare to accept and comp	ly with the Statutes and Regulations of the Portuguese admission and the annual q	Association of Renewable Energuota applied in the respective po		nember, committing to pay the fee
SIGNATURE OF LEGAL REPF	RESENTATIVE:		APPLICATION DATE:	<i></i>
DATA PROTECTION POLICY				

The personal and technical data will be collected and processed with a view of pursuing the activities of APREN and its Members and will be preserved during the companies' permanence as APREN Members. It should be noted that APREN uses reasonable technical and organizational measures to protect the security and confidentiality of personal data, and regularly reviews and improves these measures, in order to reflect legal and technological developments.

If so desired, the Data Bearer has the right to access personal data, to rectify or delete data, to limit data processing, to oppose data processing and portability. The Holder also has the right to withdraw consent at any time.

	FOR INTERNAL FILLING
ADMISSION DATE://	
APREN Associação de Energias Renováveis	Av. da República, nº 59 - 2º andar 1050-189 Lisboa Tel.: 213151621 apren@apren.pt www.apren.pt