**SHTOJCA I**

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| stema_JPG**Republika e Kosovës****Republika Kosova-Republic of Kosovo****Qeveria-Vlada-Government**Ministria e Bujqësisë, Pylltarisë dhe Zhvillimit RuralMinistarstvo Poljoprivrede, Šumarstva i Ruralnog RazvojaMinistry of Agriculture, Forestry and Rural Development  |
| **Departamenti i Shërbimeve Këshillimore dhe Teknike****Departament za Tehničke i Savjetodavne Usluge****Department of Advisory and Technical Services**  |

**FORMË APLIKIMI PËR LICENCIMIN E PERSONAVE JURIDIK PËR OFRIMIN E SHËRBIMEVE KËSHILLUESE**

**NË BUJQËSI DHE ZHVILLIM RURAL**

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| 1. **Të dhënat personit juridik/**
 |
| Emri i personit juridik/.................................................................................................................... | Statusi i personit juridik/

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OJQ Biznes Të tjera \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Adresa/...................................................................................................................Telefon & Fax/...................................................................................................................E-mail adresa & ëeb faqe/................................................................................................................... | Nr. i Biznesit/ .................................................................................................................... Nr. Fiskal/ ......................................................................................................................  |

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| 1. **Përshkrimi i aktiviteteve të personit juridik/**
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| 1. **Të dhënat e personit përgjegjës të personit juridik/**
 |
| Emri dhe Mbiemri/ Datëlindja Nr. personal/ ........................................................................... ........./........./................ .................................................  |
| Pozita ................................................................................................................................................................................................................................ |
| Adresa/.............................................................................................................................................................................................................................................Telefon/ E-mail adresa.............................................................................................. .................................................................................................................. |

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| 1. **Të dhënat e Këshilltarëve të punësuar/**
 |
| Emri dhe mbiemri/ | Pozicioni/ | Data e fillimit/ |
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| 1. **Përshkruaj objektin, hapësirat dhe pajisjet për ofrimin e shërbimeve këshilluese (m², nr. e zyrave, pajisjet teknike, etj.)**
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| **Deklaroj se kam dhënë informacione të vërteta, korrekte dhe komplete në këtë formular.** |
| Nënshkrimi................................................................................. | Data e aplikimit/............/........../............... |

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| **Shënim:** Bashkangjitur dorëzoni kopjet e dokumenteve si në vijim:1. Lejen e punës apo certifikatën për ushtrimin e veprimtarisë;
2. Letërnjoftimin e Personit Përgjegjës të personit juridik;
3. Certifikatat e Këshilltarëve për Bujqësi dhe Zhvillim Rural;
4. Kontratat e këshilltarëve;
5. Dëshmi për kryerjen e obligimeve ndaj ATK-së;
6. Fotografi me pamje nga hapësirat e objektit.
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**APPENDIX I**



**Republika e Kosovës**

**Republika Kosova-Republic of Kosovo**

**Qeveria-Vlada-Government**

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| Ministria e Bujqësisë, Pylltarisë dhe Zhvillimit RuralMinistarstvo Poljoprivrede, Šumarstva i Ruralnog RazvojaMinistry of Agriculture, Forestry and Rural Development  |
| **Departamenti i Shërbimeve Këshillimore dhe Teknike****Departament za Tehničke i Savjetodavne Usluge****Department of Advisory and Technical Services**  |

**APPLICATION FORM FOR LICENSING OF LEGAL PERSONS PROVIDING ADVISORY SERVICES ON AGRICULTURE AND RURAL DEVELOPMENT**

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| 1. **Data of legal person/**
 |
| Name of legal person/.................................................................................................................... | Statute of legal person/

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NGO Business Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Address/...................................................................................................................Phone & Fax/...................................................................................................................E-mail address & website/................................................................................................................... |  Business No./ .................................................................................................................... Fiscal No./ ......................................................................................................................  |

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| 1. **Description of the activities of legal person/**
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| 1. **The data of the responsible person of the legal person/**
 |
| Name and Surname/ Date of birth Personal No. / ........................................................................... ........./........./................ .................................................  |
| Position ................................................................................................................................................................................................................................ |
| Address/.............................................................................................................................................................................................................................................Phone/ E-mail address .............................................................................................. .................................................................................................................. |

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| 1. **The data of the Advisers employed/**
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| Name and surname/ | Position/ | Commencement date/ |
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| 1. **Describe the facility, spaces and equipments providing advisory services (m², no. of offices, technical equipments, etc).**
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| **I Hereby certify that the information above is true, accurate and complete.**  |
| Signature ................................................................................. | Date of application............/........../............... |

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| **Note:** please send the attached copies of documents: * 1. Work permit or certificate for exercising the activity;
	2. Identification Card of the Responsible Person of the Legal Person;
	3. Certificates of Advisers for Agriculture and Rural Development;
	4. Contracts of Advisers;
	5. Proof of payments in the Tax Administration of Kosovo;
	6. Photography with the view from the spaces of facility.
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**DODATAK I**

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| stema_JPG**Republika e Kosovës****Republika Kosova-Republic of Kosovo****Qeveria-Vlada-Government** Ministria e Bujqësisë, Pylltarisë dhe Zhvillimit RuralMinistarstvo Poljoprivrede, Šumarstva i Ruralnog RazvojaMinistry of Agriculture, Forestry and Rural Development  |
| **Departamenti i Shërbimeve Këshillimore dhe Teknike****Departament za Tehničke i Savjetodavne Usluge****Department of Advisory and Technical Services**  |

**OBRAZAC ZA APLICIRANJE ZA LICENCIRANJE PRAVNIH LICA ZA PRUŽANJE SAVETODAVNIH USLUGA U POLJOPRIVREDI I RURALNOM RAZVOJU**

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| **1. Podaci o pravnom licu /** |
| Ime pravnog lica /.................................................................................................................... | Status pravnog lica /

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NVO Poslovanje Ostalo \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Adresa/...................................................................................................................Telefon & Fax/...................................................................................................................E-mail adresa & veb stranica /................................................................................................................... | Br. poslovanja / .................................................................................................................... Fiskalni br. / ......................................................................................................................  |

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| **2. Opis aktivnosti pravnog lica /** |
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| **3. Podaci osobe odgovorne za pravno lice /** |
| Ime i prezime / Datum rođenja Lični broj/ ........................................................................... ........./........./................ .................................................  |
| Pozicija ................................................................................................................................................................................................................................ |
| Adresa/.............................................................................................................................................................................................................................................Telefon/ E-mail adresa.............................................................................................. .................................................................................................................. |

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| 1. **Podaci o zapošljenim savetnicima /**
 |
| Ime i prezime / | Pozicija/ | Datum početka/ |
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| 1. **Opišite objekat, prostorije I uređaje za pružanje savetodavnih usluga (m², br. kancelarija, tehničkih uređaja, itd.)**
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| **Izjavljujem da sam dao tačne i potpune informacije u ovom obrascu.** |
| Potpis ................................................................................. | Datum apliciranja /............/........../............... |

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| **Napomena:** Sledeće dokumente trebate podneti kao priložene:1. Radnu dozvolu ili uverenje za obavljanje delatnosti;2. Ličnu kartu osobe odgovorne za pravno lice; 3. Uverenja savetnika za poljoprivredu i ruralni razvoj; 4. Ugovore savetnika; 5. Dokaz o izvršenju obaveza prema poreskoj upravi Kosova;6. Fotografija sa pogledom na prostorije objekta. |