**MODEL II-a) - ADVERTISING OF ORGANIZED TRAVEL PROGRAMMES OF STRATEGIC PARTNERS**

**Submission form 1 - General information about the strategic partner**

|  |  |
| --- | --- |
| Name of the strategic partner  |  |
| Registered office of the strategic partner  |  |
| E-mail address of the strategic partner and telephone number |  |
| VAT number of the strategic partner  |  |
| Person authorized to represent the strategic partner (name, surname, position) |  |
| E-mail address of the person authorized to represent the strategic partner |  |
| Strategic partner’s share in the nominated media plan in the absolute amount (with and without VAT) |  |
| Bank name |  |
| Bank address |  |
| Bank account number / IBAN / SWIFT |  |

 **Stamp and signature of the person authorized to represent**

 **the strategic partner**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submission form 2 - Information about organized travel programmes of strategic partner for Croatia**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Indicator** | **Total Croatia** | **Istria** | **Kvarner** | **Zadar** | **Šibenik** | **Split** | **Dubrovnik** | **City of Zagreb** | **continental area** |
| **Realized number of passengers in 2014** |  |
| Total |  |  |  |  |  |  |  |  |  |
| By organized air transport |  |  |  |  |  |  |  |  |  |
| Total number of booked beds in all commercial accommodation facilities  |  |  |  |  |  |  |  |  |  |
| Realized total number of plane seats |  |  |  |  |  |  |  |  |  |
| Realized number of rotations (total and per month) and the start and end date of air programmes for each departure airport (indicate the departure and arrival airports) |  |  |  |  |  |  |  |  |  |
| **Expected number of passengers in 2015** |  |
| Total |  |  |  |  |  |  |  |  |  |
| By organized air transport |  |  |  |  |  |  |  |  |  |
| Total number of booked beds in all commercial accommodation facilities |  |  |  |  |  |  |  |  |  |
| Expected total number of plane seats |  |  |  |  |  |  |  |  |  |
| Expected number of rotations (total and per month) and the start and end date of air programmes for each departure airport (indicate the departure and arrival airports) |  |  |  |  |  |  |  |  |  |
| **Planned number of passengers in 2016** |  |
| Total |  |  |  |  |  |  |  |  |  |
| By organized air transport |  |  |  |  |  |  |  |  |  |
| Total planned number of booked beds in all commercial accommodation facilities for 2016 |  |
| Planned total number of plane seats |  |  |  |  |  |  |  |  |  |
| Planned number of rotations (total and per month) and the start and end date of air programmes for each departure airport (indicate the departure and arrival airports) |  |  |  |  |  |  |  |  |  |

**We confirm under material and criminal responsibility the accuracy of the above data. All data are subject to control of the State Inspectorate Office of the Republic of Croatia.**

**Stamp and signature of the person authorized to represent**

**the strategic partner**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submission form 3 - List of key partners (hotels and other companies) with number of booked beds in Croatia**

|  |  |  |  |
| --- | --- | --- | --- |
| **Ordinal number** | **Exact name and address of the hotel or other company with whom the strategic partner has booked beds in Croatia** | **Number of booked beds and lease period** | **Number of passengers**1. **pre and post season**
2. **main season (July-August)**
 |
| **2014** | **2015** | **Plan for 2016** | **2014** | **2015** | **Plan for 2016** |
| **1.** |  |  |  |  |  |  |  |
| **2.** |  |  |  |  |  |  |  |
| **3.** |  |  |  |  |  |  |  |
| **4.** |  |  |  |  |  |  |  |
| **5.** |  |  |  |  |  |  |  |
| **6.** |  |  |  |  |  |  |  |
| **7.** |  |  |  |  |  |  |  |
| **8.** |  |  |  |  |  |  |  |
| **9.** |  |  |  |  |  |  |  |
| **10.** |  |  |  |  |  |  |  |
| **11.** |  |  |  |  |  |  |  |
| **12.** |  |  |  |  |  |  |  |
| **13.** |  |  |  |  |  |  |  |
| **14.** |  |  |  |  |  |  |  |
| **15.** |  |  |  |  |  |  |  |

**We confirm under material and criminal responsibility the accuracy of the above data. All data are subject to control of the State Inspectorate Office of the Republic of Croatia.**

**Stamp and signature of the person authorized to represent**

**the strategic partner**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Submission form 4 – Media plan**

**Media buying**

**Own sales and promotional channels**

**Submission form 5 - General information about the promotional agency**

|  |  |
| --- | --- |
| Name of the promotional agency |  |
| Registered office of the promotional agency |  |
| E-mail address of the promotional agency and telephone number |  |
| VAT number of the promotional agency |  |
| Person authorized to represent the promotional agency (name, surname, position) |  |
| E-mail address of the person authorized to represent the promotional agency |  |
| Bank name  |  |
| Bank address |  |
| Bank account number / IBAN / SWIFT |  |

**Submission form 6 - Statement of paid debts**

**STATEMENT OF PAID DEBTS**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name and surname) from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as person authorized to represent the strategic partner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (company) with registered office in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby declare that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (company) at the time of giving this statement has no due and unpaid debts on the basis of sojourn tax, tourist membership fee, and other debts toward the CNTB, as well as obligations from business toward Croatian legal and natural persons on the basis of executed court rulings.

In \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_ \_\_\_\_ 2015

(place) (date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(stamp and signature of the person authorized to represent

the strategic partner)