MODEL 1

(to be drafted on CONTRACTOR's /SUPPLIER's headed paper)

AFFIRMATION OF CERTIFICATION

(pursuant to Presidential Decree no. 445 c	of 28 December 2000)
The undersigned on	, born and residing in
fiscal code,	in his/her capacity as
leg	al representative [or
authorized signatory as per attached le	
auchorized signatory as per accaenca re	
with registered offices in	/
enrolment with the Register of Compan	nies and fiscal code
, VAT Registration No	, cognizant
of penal liabilities and subsequent sanctions w	hich may apply in case of
misrepresentations,	
•	
REPRESENTS	
for the purposes of the financial flow traceabil	ity as per art. 3 of Law
no. 136/2010	
• that the current account no (II	
is a dedicated bank account pursuant to a	
and, therefore, payments under all o	
present or future, established with eni	spa and eni spa controlled
companies in the name and on behalf of whi	ch eni spa acts, are made

or, alternatively

to the above current account;

•	that the current account no	opened at the
	Bank(IBAN)is
	a dedicated bank account pursuant to art. 3 of Law no.	136/2010 and,
	therefore, the payments under the	CONTRACT
	covering	
	Tender Identification Code (CIG) no to the above current account;	
Th	e undersigned also represents:	
•	that the person(s) delegated to operate on such dedi	.cated current
	account are: [FIRST NAME AND SURNAME]	
	[FISCAL CODE]	
The un	dersigned acknowledges that no payment shall be made	by COMPANY to
dedica	ted bank accounts other than that indicated above and	undertakes to
prompt	ly notify COMPANY of any change relevant to the informat	ion given.
Subjec	t to the above provisions, to ensure that the invoice	s are settled
when d	ue, the undersigned acknowledges that the following det	ails shall be
shown	on the invoice(s):	
	- the name and address of the Bank where the d	edicated bank
	account has been opened;	
	- the name of the bank branch;	
	- number of dedicated bank account;	
	- BBAN code (for national payments);	
	- IBAN code and BIC code (for international payment	s).
One ph	notostat copy of the valid identity document of the	person making
declar	ation is attached hereto:	
No.	issued on	by
	,(Date)	