**OBR-1**

**PODATKI O PRIJAVITELJU PROGRAMA**

**Na podlagi javnega razpisa objavljenega v Uradnem listu RS z dne 31. 1. 2025 »Javni razpis za sofinanciranje kulturnih programov v Mestni občini Koper za leto 2025«** **se prijavljamo na vaš javni razpis in prilagamo našo dokumentacijo v skladu z navodili za prijavo na razpis.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| **PODATKI O PRIJAVITELJU:** | | | | | | | | |
|  |  |  |  |  |  |  |  |  |
| Naziv oziroma ime prijavitelja | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Naslov prijavitelja: | |  |  |  |  |  |  |  |
| Korespondenčni naslov: | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| DAVČNI ZAVEZANEC: DA NE | | | | | |  |  |  |
| ID za DDV: SI | |  |  |  |  |  |  |  |
| Davčna številka: | |  |  |  |  |  |  |  |
| TRR: |  |  |  |  |  |  |  |  |
| Banka: |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Matična številka | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Število aktivnih članov prijavitelja / število sekcij | | | | |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Zakoniti zastopnik | |  |  |  |  |  |  |  |
| Številka telefona / mobilnega telefona | | | |  |  |  |  |  |
| Elektronska pošta | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Kontaktna oseba | |  |  |  |  |  |  |  |
| Številka telefona / mobilnega telefona | | | |  |  |  |  |  |
| Elektronska pošta | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Odgovorna oseba za podpis pogodbe | | | |  |  |  |  |  |

Predstavitev delovanja društva:

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

● Kako si zagotavljate prostor, kjer izvajate vašo dejavnost (ustrezno obkroži):

- ste lastnik prostorov – naslov:

- imate prostore v najemu – naslov:

- so vam prostori dani v so-uporabo brez najemnine – naslov:

- drugo \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Datum: **Žig in podpis**

**odgovorne osebe prijavitelja:**