INTRED
CONNESSI SEMPRE

REQUEST FORM FOR CONCESSIONARY FINANCIAL TERMS RESERVED FOR CONSUMERS WITH DISABILITIES FOR FIXED-LOCATION ELECTRONIC COMMUNICATIONS SERVICES

This form is intended to request the activation of the offer dedicated to users who meet the requirements set out in Resolution 290/21/CONS. This request may be submitted when signing the contract or at any later time during a contractual relationship that is already active.

On our website, on the dedicated page "Concessions for users with disabilities", which can be reached directly from the homepage, you can find these forms and all detailed information on the available fixed-network offers.

This concession, where the requirements are met, will apply from the date on which the operator receives this application.

INTRED undertakes to process this request promptly, no later than 30 days from the date of receipt of the required documentation. The date of receipt is the date on which the complete documentation is delivered.

The concessions do not apply to any other paid services additional to the tariff plan, such as, for example, the rental or sale of the modem.

PERSONAL DATA

The undersigned (surname and first name) _____ born in

_____ resident in

(municipality and province) _____ telephone number

_____ email _____ Fax _____

Tax Code _____ Identity document (identity card)

No. _____ issued by _____ last renewal _____

DECLARES

that they meet one of the requirements set out in Resolution 290/21/CONS, in particular (tick the corresponding box)

☐ Total blindness (Article 2 of Law No. 138/2001)

☐ Partial blindness (Article 3 of Law No. 138/2001)

☐ Deafness (Article 1, paragraph 2 of Law No. 381/1970)

☐ Severe limitations of walking ability (Article 30, paragraph 7 of Law No. 388/2000, certified in the *handicap* assessment reports

☐ User living with a person who meets the requirements set out in Resolution 290/21/CONS

REQUESTS

With reference to the requested INTRED service

☐ New order/activation

☐ Already activated/existing on ..... order code/login .....

the 50% reduction of the monthly fee for the chosen service, as provided for by Article 4, paragraph 1 of Resolution 290/21/CONS.

THAT THEY ARE AWARE THAT

- the concessionary financial terms may be used for only one supply contract for the services offered by INTRED;
- they must promptly notify INTRED if they no longer meet one of the requirements set out in Resolution 290/21/CONS and declared above;
- where they already benefit from a government concession on ultra-broadband service offers, the concessions cannot be combined;
- a third party may be chosen as manager of the contract at any time and may likewise be revoked;
- anyone who makes false statements is punishable under the Criminal Code and the special laws on the matter, and they declare the following pursuant to and for the purposes of Articles 46 and 47 of Presidential Decree No. 445/2000, and that they are aware that no liability may be attributed to INTRED should this declaration prove to be false, and therefore that they hold INTRED harmless from any consequent liability action and/or claim that may be brought by third parties.
- their data will be processed by INTRED for the purposes of executing this concession request. The undersigned is also aware that they can view the text of the privacy notice by consulting the website www.intred.it

The undersigned gives their consent.

Full signature

_____

Place and date

_____

Documents to be attached, required to benefit from the concession:

- copy of the medical certificate issued by the competent public health authority, proving the requirements as established by Resolution 290/21/CONS;
- copy of a valid identity document
- copy of the certification attesting common residence and/or relating to the composition of the household (in the case of a request submitted by a person living with the beneficiary)
- proxy document (in the case of a proxy to manage the contract), guardianship or notarial power of attorney

for the partially blind and for disabled persons with severe limitations of walking ability, the following must be attached:

- declaration of commitment to use only one of the concessions provided for by the resolution.

The form, completed in all its parts and accompanied by the appropriate required documents, must be sent by registered letter to the address Via P. Tamburini 1 – 26136 BS or by fax to 0307280100 or by email to the address perte@intred.it

TO BE COMPLETED IN THE CASE OF A PROXY FOR THE MANAGEMENT OF THE CONTRACT

The undersigned (surname and first name) _____ born in

_____ resident in

(municipality and province) _____ telephone number

_____ email _____ Fax _____

Tax Code _____ Identity document (identity card)

_____ No. _____ issued by _____ last renewal _____

AUTHORISES

(surname and first name) _____ born in

_____ resident in (municipality and province)

_____ telephone number _____

email _____ Fax _____

Tax Code _____ Identity document (identity card)

_____ No. _____ issued by _____ last renewal _____

to sign the contract and to carry out all the resulting management of the contract in my place.

Full signature

_____

Place and date

_____

This document is an English translation of the original Italian document and is provided for ease of reference. The translation may contain errors, omissions or inaccuracies. In the event of any discrepancy or inconsistency between this translation and the Italian original, the Italian original shall prevail to the extent permitted by applicable law.