

ACCESSION FORM FOR BENEFICIARIES

(To be filled in and signed by all beneficiaries other than the coordinator and then later on for amendments for any new beneficiary (coordinator or other).)

[BEN legal name (short name)], PIC [number], established in [legal address]

hereby agrees

to become [beneficiary]/[coordinator]

in the Specific Agreement [insert number] — [insert acronym]

(‘the Agreement’)

between [COO legal name (short name)] **and** the European Union (‘EU’), represented by the European Commission (‘European Commission’ or ‘granting authority’),

[OPTION for beneficiaries which are NOT coordinator:

mandates the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to *[OPTION: for coordinators: take on the obligations and role of coordinator and to]* implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out *[OPTION for new beneficiaries/coordinators: as from [[insert date]]/ [the date of the signature of the accession form]/[the date of entry into force of the amendment] (‘accession date’)* if the granting authority agrees with the request for amendment.

Beneficiaries which enter in the context of a partial transfer of rights and obligations (PTRO; ‘partial takeover’) acknowledge and accept that they may be held jointly and severally liable for undue amounts paid to the beneficiary they replace (i.e. recoveries).

SIGNATURE

For the beneficiary /new beneficiary/new coordinator

[function/forename/surname]

[electronic signature]

Done in [English] on [electronic time stamp]