The Joint Committee,

Pursuant to Article 21.7 of the Agreement on the Amendment of and Accession to the Central European Free Trade Agreement;

With the objective to ensure transparency in the area of state aid,

Has decided as follows:

**Article 1**

Definitions

For the purpose of this decision:

a) “aid” shall mean any measure fulfilling all the criteria laid down in Article 21 (1) of the Agreement,

b) “aid scheme” shall mean any act on the basis of which individual aid awards may be decided, without further implementing measures being required, for undertakings defined within the act in a general and abstract manner, and any act on the basis of which aid may be awarded to one or several undertaking for an indefinite period of time and/or for an indefinite amount but not linked to a specific project;

c) “existing aid scheme” shall mean any aid scheme which have existed prior to the adoption of this decision and is still applicable after the adoption of this decision.

d) “new aid schemes” shall mean all aid schemes which are not existing aid scheme, including alterations to existing aid schemes.
Article 2

The Joint Committee hereby decides that the Parties shall report to the Joint Committee through the Secretariat on their existing aid schemes by using the form and questionnaire which are enclosed to this decision in its Annex 1 (Report on State Aid). The first reporting of existing aid schemes shall be completed by the next meeting of the Joint Committee to be held following the adoption of this decision.

Article 3

The Parties shall report to the Joint Committee on their new aid schemes through using the same form and questionnaire not later than 3 months after their entry into force.

This decision shall take effect on the date of its adoption.

Adopted in Paris on 23 November 2011 in the presence of representatives of

Republic of Albania

Bosnia and Herzegovina

Republic of Croatia

Republic of Macedonia

Republic of Moldova

Montenegro

Republic of Serbia

The United Nations Interim Administration Mission in Kosovo on behalf of Kosovo in accordance with United Nations Security Council Resolution 1244
REPORT ON STATE AID
PURSUANT TO ARTICLE 21 (7) OF CEFTA 2006

REPORTING PARTY: ........................

Date.........
1. IDENTIFICATION OF AID GRANTOR

1.1. CEFTA Party concerned
.................................................................................................................................................................................................

1.2. Name of the state aid granting authority
........................................................................................................................................................................................................

1.3. Responsible contact person:

Name: .................................................................................................................................................................................................

Address: ..............................................................................................................................................................................................

Telephone: .......................................................................................................................................................................................

Fax: ............................................................................................................................................................................................... 

E-mail: ............................................................................................................................................................................................
2. **Title of the State Aid Scheme**

   ………………………………………………………………………………………………………………………………………………………………………

3. **Period Covered by the Reporting**

   ………………………………………………………………………………………………………………………………………………………………………

4. **Policy Objective and/or Purpose of the State Aid Scheme**

   Please indicate primary objective and, if applicable, secondary objective(s):

<table>
<thead>
<tr>
<th>Primary objective</th>
<th>Secondary objective (^1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Please tick one only)</td>
<td></td>
</tr>
<tr>
<td>✓ Regional development</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Research and development</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Innovation</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Environmental protection</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Energy saving</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Rescuing firms in difficulty</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Restructuring firms in difficulty</td>
<td>☐</td>
</tr>
<tr>
<td>✓ SMEs</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Employment</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Training</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Promotion of export and internationalisation</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Sectoral development (^2)</td>
<td>☐</td>
</tr>
<tr>
<td>✓ Remedy for a serious disturbance in the economy</td>
<td>☐</td>
</tr>
</tbody>
</table>

\(^1\) A secondary objective is one for which, in addition to the primary objective, the aid will be exclusively earmarked. For example, a scheme for which the primary objective is research and development may have as a secondary objective small and medium-sized enterprises (SMEs) if the aid is earmarked exclusively for SMEs. The secondary objective may also be sectoral, in the case for example of a research and development scheme in the steel sector.

\(^2\) Please specify sector in point 7.1.
5. NATIONAL LEGAL BASIS

5.1. Please list the national legal basis including the implementing provisions and their respective sources of references:

Title: ...........................................................................................................................................................
.......................................................................................................................................................................

Reference (where applicable): ..........................................................................................................................
.......................................................................................................................................................................

6. FORM OF THE STATE AID SCHEME AND MEANS OF FUNDING

Specify the form of the aid scheme made available to the beneficiary (where appropriate, for each scheme):

☐ Direct grant

☐ Reimbursable grant

☐ Soft loan

☐ Interest subsidy

☐ Tax advantage

☐ Reduction of social security contributions

☐ Provision of risk capital

☐ Other forms of equity intervention

Please specify:
.......................................................................................................................................................................

☐ Debt write-off

☐ Guarantee

☐ Other

Please specify: .....................................................................................................................................................
7. **Beneficiaries: To Whom the State Aid Scheme is Provided**

7.1. Sector(s) of the beneficiary(ies):

- [ ] Not sector specific

- [ ] Sector specific, please specify according to NACE rev. 2 classification:
  - [ ] Mining and Quarrying
  - [ ] Manufacturing industry
    - [ ] Textiles
    - [ ] Pulp and paper
    - [ ] Chemical and pharmaceutical industry
    - [ ] Man-made fibres
    - [ ] Steel
    - [ ] Industrial machinery
    - [ ] Electrical and optical equipment
    - [ ] Motor vehicles
    - [ ] Shipbuilding
    - [ ] Other Manufacturing sector, please specify (according to NACE Rev 2):
      
  

7.2. Type of beneficiaries

- [ ] All firms (large firms and small and medium-sized enterprises)
- [ ] Only large enterprises
- [ ] Only small and medium-sized enterprises
- [ ] Firms in difficulties
8. **STATE AID PER UNIT OR TOTAL AMOUNT OF THE STATE AID (ESTIMATED)**

.................................................................................................................................
.................................................................................................................................
.................................................................................................................................
.................................................................................................................................

9. **DURATION OF THE STATE AID SCHEME**

.................................................................................................................................

**DECLARATION:**

I certify that to the best of my knowledge the information provided on this form, its annexes and its attachments is accurate and complete.

Date and place of signature: .................................

Signature: .................................................................

Name and position of person signing: .................................