



Ministry of Economy and Industry Industrial Cooperation Authority, ICA

Appendix C₁

				Claim	for In	dustrial	Coope	ration (Credit			
For the calendar year												
1.	Name of Foreign Supplier ("Supplier"):											
2.	Na			address				-				cturer:
		eferences										
	□ SME □ Preferred Zone											
3	Go	ods or	serv	ices prov	vided	during	the	ahove	mentio	ned	Calendar	year:
5.						-				·····		year.
	Production Site:											
	Country: City:											
4.	Industrial Cooperation Category ¹ :											
	a) Direct - Industrial Cooperation directly related to project/contract : Ref:											
		□ Local Subcontracting										
	□ New Business											
		□ Acquisition of Israeli Products, Work or Services										
		□ R&D Orders										
	□ Know-How transfer											
	□ Other											
	b) Indirect											
		New	Busine	ess								
	□ Acquisition of Israeli Products, Work or Services											
		🗆 R&D	Order	S								
			tments									
		□ Know-How transfer										
		□ Other										

¹ Please mark the relevant category. If it is a direct industrial cooperation, please fill out the name and a short description of the project.





5. We hereby warrant and confirm :

5.1. That the Israeli content of each one of the goods detailed in Section 3 above constitutes at least 35% of its value;

5.2. That the Work or Services, detailed in Section 3 above performed in Israel by an Israeli citizen or a permanent resident of Israel.

6. The total Value of Goods or services provided (US\$) (calculated in accordance with the US\$ exchange rate published by the Bank of Israel at the date of invoice):

.....

I, the undersigned....., Passport Number, an authorized signatory of, hereby warrant and confirm that the above Claim for Industrial Cooperation is true and correct, and in full compliance with the Regulations and the Industrial Cooperation Undertaking by Supplier.

Foreign Supplier [Company name]:

Name:	
Title:	
Signature:	.Date:

The Israeli supplier's declaration

Israeli supplier [Company name]:

Name:	
Title:	
Signature:	.Date:
Email:	
Tel:	Cell: