**EXPRESSION OF INTEREST FORM**

**FOR THE SAF SUPPORT PROGRAM 2023**

**Requesting Carrier Information**

Company Name ………………………..

Contact Name ………………………..

Address ………………………..

email ………………………..

Phone ………………………..

**Fuel Information**

Reference Sub-period:

 [ ]  Sub-period 1: 01/05/2023 – 30/08/2023

 [ ]  Sub-period 2: 01/09/2023 – 31/12/2023

"Neat SAF" amount for which the remuneration is requested: ……………………….. (in metric tons)

**Submission Deadlines**

This form must be submitted to the following mail address: relcomppaa@pec.seamilano.eu

• for Sub-period 1: between **03/04/2023** (08:00:00 CET) and **14/04/2023** (24:00:00 CET)

• for Sub-period 2: between **14/07/2023** (08:00:00 CET) and **28/07/2023** (24.00:00 CET)

**Please note that expressions of interest submitted in advance or after the above deadlines will not be accepted**

Date, ………………………..

Stamp and signature