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| Wn-O **Uwaga! Pełna funkcjonalność formularza i powiadomienie o aktualizacji po WŁĄCZENIU MAKR. Jak to zrobić www.iform.pl/makra** | | | | | Wniosek osoby niepełnosprawnej o przyznanie środków na podjęcie działalności gospodarczej, rolniczej albo na wniesienie wkładu do spółdzielni socjalnej | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Podstawa prawna: | | | | | | Art. 12a ust. 3 ustawy z dnia 27 sierpnia 1997 r. o rehabilitacji zawodowej i społecznej oraz zatrudnianiu osób niepełnosprawnych | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | (Dz. U. z 2011 r. Nr 127, poz. 721, z późn. zm.). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Składający: | | | | | | Osoba niepełnosprawna ubiegająca się o środki Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych na podjęcie | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | działalności gospodarczej, rolniczej albo na wniesienie wkładu do spółdzielni socjalnej. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Adresat: | | | | | | Starosta lub prezydent miasta na prawach powiatu | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| A. Dane o wniosku | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 1. Wniosek1 | | | | | | | | | | | | | | | | | | | | | | | |  | 2. Numer akt | | | | | |  | 3. Data wpływu | | | | | | | | | | | | | | | | | | | | |  |
|  |  | 1. Zwykły | | | | | | | | | | |  | | 2. Korygujący | | | | | | | | | |  |  | | | | | |  |  |  | | | | | | |  | |  | | | |  |  | | |  | | |  |
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| B. Dane ewidencyjne wnioskodawcy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | B1. Dane ewidencyjne i adres wnioskodawcy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 4. Imię (imiona) i nazwisko wnioskodawcy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5. NIP | | | | | | | | | | | 6. PKD | | | | | | | | | | | |  |
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|  | 7. Województwo | | | | | | | | | | | | | | | | | | | | | | | | | | 8. Miejscowość | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 9. Kod pocztowy | | | | | 10. Poczta | | | | | | | | | | | | | | | | | | | | | 11. Ulica | | | | | | | | 12. Nr domu | | | | | | | | | | 13. Nr lokalu | | | | | | | | |  |
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|  | 14. Telefon2 | | | | | | | | | | | | | | | | | 15. Faks2 | | | | | | | | | | | 16. E-Mail | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | B2. Adres do korespondencji *Wypełnia wnioskodawca mający inny adres korespondencyjny niż adres wykazany w bloku B1* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 17. Kod pocztowy | | | | | | | 18. Poczta | | | | | | | | | | | | | | | | | | | 19. Ulica | | | | | | | | 20. Nr domu | | | | | | | | | | 21. Nr lokalu | | | | | | | | |  |
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|  | 22. Telefon2 | | | | | | | | | | | | | | | | | 23. Faks2 | | | | | | | | | | | 24. E-mail | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | B3. Rachunek bankowy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 25. Nazwa banku | | | | | | | | | | | | | | | | | | | | | | | | | | | 26. Numer rachunku bankowego | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| C. Dane dotyczące wnioskowanej pomocy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 27. Wnioskowana kwota | | | | | | | | | | | | | | | | | | | 28. Rodzaj działalności | | | | | | | | | | 29. Forma zabezpieczenia | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 30. Przewidywane efekty ekonomiczne prowadzenia działalności | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| D. Wyszczególnienie kosztów i wydatków do sfinansowania (1)3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Lp. | Rodzaj kosztu / wydatku | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Kwota | | | | | | | | | | | | | | | |  |
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|  | 1 | 31. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 32. | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  |
|  | 2 | 33. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 34. | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  |
|  | 3 | 35. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 36. | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  |
|  | 4 | 37. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 38. | | | | | | | | | | | | | | | |  |
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|  | 5 | 39. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 40. | | | | | | | | | | | | | | | |  |
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|  | 6 | 41. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 42. | | | | | | | | | | | | | | | |  |
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|  | 7 | 43. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 44. | | | | | | | | | | | | | | | |  |
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|  | 8 | 45. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 46. | | | | | | | | | | | | | | | |  |
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|  | 9 | 47. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 48. | | | | | | | | | | | | | | | |  |
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|  | 10 | 49. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 50. | | | | | | | | | | | | | | | |  |
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| 1 W odpowiednich polach należy wstawić znak X.  2 Należy podać także numer kierunkowy. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Wn-O | | | | | | **1/2** | | | | |
| 3 Wykazać koszty i wydatki związane z podjęciem działalności gospodarczej lub rolniczej albo wniesieniem wkładu do spółdzielni socjalnej po raz pierwszy lub z ponownym podjęciem tej działalności lub ponownym wniesieniem wkładu do spółdzielni socjalnej, w szczególności dotyczące pozyskania lokalu, uzyskania niezbędnych pozwoleń oraz odbycia szkoleń, zakupu  środków trwałych, materiałów, towarów, opłaty wpisowego lub wkładu do spółdzielni socjalnej (w kwocie brutto). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| D. Wyszczególnienie kosztów i wydatków do sfinansowania (2)4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Lp. | Rodzaj kosztu / wydatku | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Kwota | | | | | | | | | | | | | | | | |  |
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|  | 11 | 51. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 52. | | | | | | | | | | | | | | | | |  |
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|  | 12 | 53. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 54. | | | | | | | | | | | | | | | | |  |
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|  | 13 | 55. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 56. | | | | | | | | | | | | | | | | |  |
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|  | 14 | 57. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 58. | | | | | | | | | | | | | | | | |  |
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|  | 15 | 59. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 60. | | | | | | | | | | | | | | | | |  |
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|  | 16 | 61. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 62. | | | | | | | | | | | | | | | | |  |
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|  | 17 | 63. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 64. | | | | | | | | | | | | | | | | |  |
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|  | 18 | 65. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 66. | | | | | | | | | | | | | | | | |  |
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|  | 19 | 67. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 68. | | | | | | | | | | | | | | | | |  |
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|  | 20 | 69. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 70. | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  |
|  | 21 | 71. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 72. | | | | | | | | | | | | | | | | |  |
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|  | 22 | 73. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 74. | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  |
|  | 23 | 75. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 76. | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  |
|  | 24 | 77. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 78. | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  |
|  | 25 | 79. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 80. | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  |
|  |  | Razem5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 81. | | | | | | | | | | | | | | | | |  |
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|  |  | Wkład własny | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 82. | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  |
|  |  | Do sfinansowania z wnioskowanych środków6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 83. | | | | | | | | | | | | | | | | |  |
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|  | Oświadczam, że1: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | jestem zarejestrowany(-na) w powiatowym urzędzie pracy jako bezrobotny(-na) albo poszukujący(-ca) pracy niepozostąjący(-ca) w zatrudnieniu, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | korzystałem(-łam)/ | | | | | | | | | | |  | | | nie korzystałem(-łam) ze środków PFRON lub z innych środków publicznych na podjęcie działalności gospodarczej | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | albo rolniczej, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | posiadam/ | | | | | | |  | | nie posiadam zaległości w zobowiązaniach wobec Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | zalegam/ | | | |  | | | | nie zalegam z opłacaniem w terminie podatków, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Oświadczam, że dane zawarte we wniosku są zgodne ze stanem prawnym i faktycznym. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Do wniosku załączam kopię dokumentu potwierdzającego niepełnosprawność w rozumieniu ustawy z dnia 27 sierpnia 1997 r. o rehabilitacji zawodowej i społecznej oraz zatrudnianiu osób niepełnosprawnych (Dz. U. z 2011 r. Nr 127, poz. 721, z późn. zm.). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | Do wniosku załączam pisemną informację spółdzielni socjalnej o przyjęciu mnie do spółdzielni socjalnej jako członka. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Jestem świadomy(-ma) odpowiedzialności karnej za zeznanie nieprawdy lub zatajenie prawdy. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 84. Data sporządzenia wniosku | | | | | | | | | | | | | | | | | | | | | | | 85. Podpis wnioskodawcy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 4Wykazać koszty i wydatki związane z podjęciem działalności gospodarczej lub rolniczej albo wniesieniem wkładu do spółdzielni socjalnej po raz pierwszy lub z ponownym podjęciem tej działalności lub ponownym wniesieniem wkładu do spółdzielni socjalnej, w szczególności dotyczące pozyskania lokalu, uzyskania niezbędnych pozwoleń oraz odbycia szkoleń, które zostaną poniesione do dnia poprzedzającego dzień podjęcia tej działalności lub wniesienia wkładu do spółdzielni socjalnej, oraz koszty i wydatki przeznaczane w szczególności na zakup środków trwałych, materiałów, towarów, pozyskanie lokalu, opłatę wpisowego lub wkładu do spółdzielni socjalnej oraz harmonogram wydatków w ramach wnioskowanych środków (w kwocie brutto).  5Poz. 81 = poz. 32 + poz. 34 + poz. 36 + poz. 38 + poz. 40 + poz. 42 + poz. 44 + poz. 46 + poz. 48 + poz. 50 + poz. 52 + poz. 54 + poz. 56 + poz. 58 + poz. 60 + poz. 62 + poz. 64 + poz. 66 + + poz. 68 + poz. 70 + poz. 72 + poz. 74 + poz. 76 + poz. 78 + poz. 80.  6Poz. 83 = poz. 81 – poz. 82. Jeżeli różnica poz. 81 i 82 jest większa od piętnastokrotności przeciętnego miesięcznego wynagrodzenia w gospodarce narodowej w poprzednim kwartale od pierwszego dnia następnego miesiąca po ogłoszeniu przez Prezesa Głównego Urzędu Statystycznego w formie komunikatu w Dzienniku Urzędowym Rzeczypospolitej Polskiej „Monitor Polski”, na podstawie art. 20 pkt 2 ustawy z dnia 17 grudnia 1998 r. o emeryturach i rentach z Funduszu Ubezpieczeń Społecznych (Dz. U. z 2013 r. poz. 1440, z późn. zm.) — wpisać piętnastokrotność tego wynagrodzenia. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |