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|  | | Marca da bollo  € 14,62  Stempelmarke |
| **MODULO**  **RICHIESTA DI PRIMA VERIFICA PERIODICA** | **FORMULAR**  **ANSUCHEN UM ERSTE PERIODISCHE ÜBERPRÜFUNG** | |
| **CARRI RACCOGLIFRUTTA** | **OBSTERNTEMASCHINEN** | |

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| **Spett.le INAIL**  **Settore Ricerca, Certificazione e Verifica**  **Dipartimento Territoriale di BOLZANO** | **An das INAIL**  **Bereich Forschung, Bescheinigung und Überprüfungen**  **Gebietsdepartement von BOZEN** |

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| **Il sottoscritto** | | | | |  | | | | | | | | nato a | | | | |  | | | | | | | il |  | | | |
| **Der Unterfertigte** | | | | | ……………………………………………………………………………………………… | | | | | | | | geb. in | | | | | ………………………………………………………………………………… | | | | | | | am | ……………………………………………………. | | | |
| residente in | | |  | | | | | | | | | | | via | | | | |  | | | | | | | | n. | |  |
| wohnhaft | | | …………………………………………………………………………………………………………………………… | | | | | | | | | | | Straße | | | | | ……………………………………………………………………………………………….. | | | | | | | | Nr. | | ……………………………… |
| legale rappresentante della ditta | | | | | | | | [[1]](#footnote-1) | |  | | | | | | | | | | | | | | | | | | | |
| gesetzlicher Vertreter der Firma | | | | | | | |  | | ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | | | | | | | | | | | | | | |
| codice cliente INAIL | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| INAIL Kundennummer | | | | | | ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | | | | | |
| partita IVA | | |  | | | | | | | | | | | | | | | codice fiscale | | | | |  | | | | | | |
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| con sede sociale in | | | | |  | | | | | | | | | | | | | | | Prov. | **BZ** | | | c.a.p. | | | |  | |
| Betriebssitz in | | | | | ……………………………………………………………………………………………………………………………………….. | | | | | | | | | | | | | | | Prov. | ………………………………………….. | | | PLZ | | | | ………………………………..……….. | |
| via | |  | | | | | | | | | | | | | | n. | | | |  | | tel. | |  | | | | | |
| Straße | | …………………………………………………………………………………………………………………………………………….. | | | | | | | | | | | | | | Nr. | | | | ………………………………… | | Tel. | | ………………………………………………………………………… | | | | | |
| **Esercente attività di** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **Betriebstätigkeit** | | | | | | | ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | | | | |
| **RICHIEDE** | | | | | | | | | | | | | | |  | | **BEANTRAGT** | | | | | | | | | | | | |
| **LA PRIMA VERIFICA PERIODICA DELLA SEGUENTE ATTREZZATURA** | | | | | | | | | | | | | | |  | | **DIE ERSTE DER PERIODISCHEN ÜBERPRÜFUNGEN**  **DER FOLGENDEN MASCHINE** | | | | | | | | | | | | |
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| **Matricola / Matrikelnummer** | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |
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| **Costruttore** | | | | [[2]](#footnote-2) |  | | | | | | | | | | | | | | | | |  | | | | | | | |
| **Hersteller** | | | |  | ………………………………………………………………………………………………………………………………………… | | | | | | | | | | | | | | | | |  | | | | | | | |
| ● | Nazionalità | | | | □ | italiana | | | | | □ | estera | | | | | | | | | |  | | | | | | | |
|  | Nationalität | | | |  | italienisch | | | | |  | ausländisch | | | | | | | | | |  | | | | | | | |
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| in caso di nazionalità italiana compilare i seguenti campi | | | | | | | | | | | | | | |  | | bei italienischem Hersteller folgende Felder ausfüllen | | | | | | | | | | | | |

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| ● | partita IVA | | | MWSt-Nr. | |  | | | | | | | | | |  | | | |
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| ● | codice fiscale | | | Steuernummer | |  | | | | | | | | | |  | | | |
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| ● | indirizzo | | | Anschrift | |  | | | | | | | | | |  | | | |
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| ● | c.a.p. | | | PLZ | |  | | | | | | | | | |  | | | |
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| ● | Comune | | | Gemeinde | |  | | | | | | | | | |  | | | |
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| ● | Provincia | | | Provinz | |  | | | | | | | | | |  | | | |
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| ● | Telefono | | | Telefon | |  | | | | | | | | | |  | | | |
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| **Descrizione:** | | | | | | | | **Beschreibung:** | | | | | | | | | | | |
| ● | Numero di fabbrica | | | |  | | | | | | | | | | | | |  | | |
|  | Herstellernummer | | | | …………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | | | | | | | |  | | |
| ● | data costruzione | | | |  | | | | | | | | | | | | |  | | |
|  | Datum Herstellung | | | | ………………………………………………………………………………………………………………………………………………………………………………………………….. | | | | | | | | | | | | |  | | |
| ● | macchina accompagnata da dichiarazione di conformità CE | | | | | | | | | □ SI | | | | | □ NO | | | | | |
|  | CE-Konformitätserklärung beigefügt | | | | | | | | | □ JA | | | | | □ NEIN | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| ● | modello | | | |  | | | | | | | | | | | | |  | | |
|  | Type | | | | …………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | | | | | | | |  | | |
| ● | portata massima in Kg | | | |  | | | | | | comprese n. persone | | | | | |  | | | |
|  | Maximaltragkraft in Kg | | | | …………………………………………………………………………………………… | | | | | | einschließlich Personen Nr. | | | | | | ……………………………………………………………. | | | |
| ● | portata palco centrale in Kg | | | | |  | | | | | | |  | | | |  | | | |
|  | Tragfähigkeit Hauptplattform in Kg | | | | | ………………………………………………………………… | | | | | | |  | | | |  | | | |
| ● | Portata pedana/e estendibile/i in Kg | | | | |  | | | | | | |  | | | |  | | | |
|  | Tragfähigkeit ausfahrbare Plattform/en in Kg | | | | | ………………………………………………………………… | | | | | | |  | | | |  | | | |
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| **Messo in servizio /installato presso - in Betrieb genommen bei:** | | | | | | | | | | | |  | | | | | | | | |
| ● | indirizzo | | | |  | | | | | | | | | Anschrift | | | | | | |
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| ● | c.a.p. | | | |  | | | | | | | | | PLZ | | | | | | |
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| ● | Comune | | | |  | | | | | | | | | Gemeinde | | | | | | |
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| **NOTE / ANMERKUNGEN:** | | | | | | | | |  | | | | | | | | | | | |
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| ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………   |  |  |  | | --- | --- | --- | | **Indicare nominativo soggetto abilitato** | **CRANETEC s.r.l.** | **Angabe des zugelassenen Prüfers** | | Ragione sociale  Partita IVA | **39100 Bolzano / Bozen**  **Via E. Fermi 1 Str.** | Firmenbezeichnung  MWSt-Nummer | |  | **02763580210** |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | |
| **Si allega / Anlagen:** | | | | | | | | |  | | | | | | | | | | | |
| □ | | Copia dichiarazione conformità CE - CE-Konformitätserklärung | | | | | | | | | | | | | | | | | | |
| □ | | Attestazione omologazione ISPESL - Zulassungsbescheinigung des ISPESL[[3]](#footnote-3) | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | |  | | | | | | | | | | | |
| Data / Datum | | |  | | | | Il legale rappresentante / Der gesetzliche Vertreter | | | | | | | | | | | | | |
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|  | | |  | | | | (Timbro e firma / Stempel und Unterschrift) | | | | | | | | | | | | | |

1. inserire ragione sociale – Firmenbezeichnung einfügen [↑](#footnote-ref-1)
2. inserire ragione sociale – Firmenbezeichnung einfügen [↑](#footnote-ref-2)
3. Solo per attrezzature costruite in assenza delle specifiche disposizioni legislative – Nur für Maschinen die vor Infrafttreten der einschlägigen Gesetzesbestimmungen in Betrieb genommen wurden. [↑](#footnote-ref-3)