MAHA MedTech Mission Full CFP Application Declaration

It is hereby declared that the information furnished in this application and any associated uploads / submissions is true and correct to the best of its knowledge and that no material particulars or information have been concealed or withheld and the undersigned, for and on behalf of (the "Applicant") hereby assures, declares and undertakes the following:

- That the applicant has read and understood the terms and conditions specified in the Scheme, the guidelines, and all associated materials provided on the online portal.
- That the applicant ensures all information submitted as part of this application is true, complete, and accurate.
- That the applicant ensures that any co-funding from other Government schemes is not applied to the same scope of activities proposed under this Scheme, such that the combined financial support from this Scheme and any other Government scheme does not exceed the approved total project cost.
- That the applicant ensures no expenditure that is ineligible under the Scheme has been included in the project plan submitted with this application.
- That the applicant undertakes to extend full cooperation in the event of any queries and to provide timely, complete, and accurate responses or documents as required.
- That the applicant undertakes to comply with all applicable requirements for technical and financial progress reporting, and to furnish any additional information sought by the funder or the Government.
- That the applicant understands that proposals may be considered for funding by multiple participating funders, and additional requirements may apply depending on the funding source.
- That, if selected for support from specific funders (including the Gates Foundation), the applicant agrees to comply with applicable legal, financial, and programmatic requirements, including entering into a separate project agreement prior to fund disbursement.
- That the applicant confirms compliance with all applicable laws and regulations, including FCRA requirements where applicable.

☐ **I confirm that I have read, understood, and agree to the above declaration and the terms and conditions of the Scheme.**

Name of Authorized Signatory (Lead PI)
Designation
Name of Applicant Entity
Date