

## LISTA DI LIQUIDAZIONE

N.° Liq.: 1298

Del 29/09/2021

Visti gli ordinativi di fornitura emessi dal dirigente responsabile del centro ordinante;  
Preso atto della regolare fornitura di beni/esecuzione di servizi e conformità ordine/bolla/fattura;

- (1) Rilevata la regolarità del DURC;
- (2) Decorsi 30 gg dalla richiesta;
- (3) Rilevata la NON regolarità si richiede l'intervento sostitutivo;

SI LIQUIDA

Macrostruttura:

**PRG. SPESA: 2021 / 999 - RECUPERO**

**CONTO: 01010000300 CONCESS.,SOFTWARE,LICENZE D'USO E MARCHI**

**Fornitore: (2726) SISTEMI H.S. S.P.A.**

<u>Prot. Elett.</u>	<u>Data Reg.</u>	<u>Num. Documento</u>	<u>Data Doc.</u>	<u>Importo</u>	<u>Codice CIG</u>	<u>Ordine</u>	<u>Data Ord.</u>
0000UFVBQD0000032423	06/09/2021	2047 FTE	31/08/2021	€ 2.127,68	Z392EDEE52	OD1121/98	09/08/2021
MOD PAG: BONIF.BANCARIO CONTO DEDICATO 60GG IBAN: IT67Q0304830530000000082030							

<u>CIG</u>	<u>CUP</u>	<u>Importo</u>
Z392EDEE52		€ 2.127,68

**Totale Fornitore - 2726 € 2.127,68**

**TOTALE CONTO - 01010000300 € 2.127,68**

**TOTALE PRG. SPESA - 2021 / 999 € 2.127,68**

<b>TOTALE FATTURE LIQUIDATE</b>	<b>€ 2.127,68</b>
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**TOTALE FATTURE DEL CONTO 01010000300 € 2.127,68**

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TOTALE IMPORTO DEL CIG Z392EDEE52 € 2.127,68

NOTE

DURC IN CORSO DI VALIDITA'

Operatore:

# FATTURA ELETTRONICA

## Dati relativi alla trasmissione

Identificativo del trasmittente: **IT08245660017**  
Progressivo di invio: **1134091**  
Formato Trasmissione: **FPA12**  
Codice Amministrazione destinataria: **UFVBQD**

## Dati del cedente / prestatore

### Dati anagrafici

Identificativo fiscale ai fini IVA: **IT07393280016**  
Codice fiscale: **07393280016**  
Denominazione: **SISTEMI H.S. S.P.A.**  
Regime fiscale: **RF01** (ordinario)

### Dati della sede

Indirizzo: **CORSO L. EINAUDI 30**  
CAP: **10129**  
Comune: **TORINO**  
Provincia: **TO**  
Nazione: **IT**

Prot. elettronico: **000**  
Data registrazione: **0**  
N.Prot.Registrazione  
N.Prot.IVA: **111/2343**  
P.N.: **2021010149**  
Fornitore: **2726 SIST**  
Tot.Fattura: **2127,68**

## Dati di iscrizione nel registro delle imprese

Provincia Ufficio Registro Imprese: **TO**  
Numero di iscrizione: **889719**  
Capitale sociale: **5200000.00**  
Stato di liquidazione: **LN** (non in liquidazione)

## Recapiti

Telefono: **011.4049111**  
Fax: **011.4049222**

## Dati del cessionario / committente

### Dati anagrafici

Identificativo fiscale ai fini IVA: **IT05830420724**  
Codice Fiscale: **05830420724**  
Denominazione: **ARPA PUGLIA AGENZIA REGIONALE PREV. E PROTEZIONE AMBIENTE**

### Dati della sede

Indirizzo: **CORSO TRIESTE 27**  
CAP: **70126**  
Comune: **BARI**  
Provincia: **BA**  
Nazione: **IT**

Versione prodotta con foglio di stile Sdl [www.fatturapa.gov.it](http://www.fatturapa.gov.it)

## Dati generali del documento

Tipologia documento: **TD01** (fattura)  
Valuta importi: **EUR**

Data documento: **2021-08-31** (31 Agosto 2021)  
Numero documento: **2047 FTE**  
Importo totale documento: **2127.68**  
Causale: **FATTURA**  
Causale: **Contributo ambientale CONAI assolto ove dovuto**

## Dati dell'ordine di acquisto

Identificativo ordine di acquisto: **OD1121/98/D11**  
Data ordine di acquisto: **2021-08-09** (09 Agosto 2021)  
Codice Identificativo Gara (CIG): **Z392EDEE52**  
Numero linea di fattura a cui si riferisce: **1 , 2**  
Identificativo ordine di acquisto: **OD1121/98/D11**  
Codice Identificativo Gara (CIG): **Z392EDEE52**

## Dati relativi al trasporto

### Altri dati

Indirizzo di resa: **CORSO TRIESTE 27**  
CAP indirizzo di resa: **70125**  
Comune di resa: **BARI**  
Provincia di resa: **BA**  
Nazione di resa: **IT**

## Dati relativi alle linee di dettaglio della fornitura

### Nr. linea: 1

#### **Codifica articolo**

Tipo: **CODART**  
Valore: **10000340**  
Descrizione bene/servizio: **MS OFFICE 2019 PROFESSIONAL PLUS (USED)**  
Quantità: **8.00**  
Unità di misura: **N.**  
Valore unitario: **218.00**  
Valore totale: **1744.00**  
IVA (%): **22.00**

#### **Altri dati gestionali**

Tipo dato: **CIG**  
Valore testo: **Z392EDEE52**

### Nr. linea: 2

Descrizione bene/servizio: **ORDINE OD1121/98/D11 DEL 09/08/2021 R.D.O. N. 2676296 DEL 27/10/2021 AGGIUDICAZIONE: 626 DEL 10/11/2020 LICENZE DESTINATE ALLA U.O. SGTE**  
Valore unitario: **0.00**  
Valore totale: **0.00**  
IVA (%): **22.00**

## Dati di riepilogo per aliquota IVA e natura

Aliquota IVA (%): **22.00**  
Totale imponibile/importo: **1744.00**  
Totale imposta: **383.68**  
Esigibilità IVA: **S** (scissione dei pagamenti)  
Riferimento normativo: **22% SPLIT PAYMENT-ART.17-TER, DEL DPR 633/1972**

## Dati relativi al pagamento

Condizioni di pagamento: **TP02** (pagamento completo)

### **Dettaglio pagamento**

Modalità: **MP05** (bonifico)  
Decorrenza termini di pagamento: **2021-08-31** (31 Agosto 2021)  
Termini di pagamento (in giorni): **30**  
Data scadenza pagamento: **2021-09-30** (30 Settembre 2021)

Importo: **1744.00**

Istituto finanziario: **BANCA DEL PIEMONTE S.P.A.**

Codice IBAN: **IT67Q0304830530000000082030**

Codice ABI: **03048**

Codice CAB: **30530**

Codice BIC: **BDCPITTT**

### **Dati relativi agli allegati**

Nome dell'allegato: **FTV\_1134091\_2021\_20007\_2047\_31082021.PDF**

Formato: **PDF**

Descrizione: **FATTURA n. 2047 FTE del 31/08/2021**

Versione prodotta con foglio di stile Sdl [www.fatturapa.gov.it](http://www.fatturapa.gov.it)

Sistemi HS SpA  
Logistica  
Via Torino 176  
10093 COLLEGNO  
ITALY

## Deletion Statement

Operation Number 004875  
Document Number 2022-70351  
Date 13.08.2021  
Customer Number 21085  
Processor Nicole Neumaier

Please indicate in all correspondence !

Reference	Delivery Note 2022-20369	Our VAT ID	DE261400530
Supplier Number	33572	Your VAT ID	IT07393280016
Your order	from 13.08.2021	Offer No.	00009897

**Transferee** Agenzia Regionale per la Prevenzione e la Protezione dell'Ambiente

Pos.	Part No.	Description	Quantity ME
1	10000340	MS Office 2019 Professional Plus	8 Units
	License ID:	6809597	
	Transferring Entity	Relicense GmbH	
	Prior Owner / First Owner	CapeFoxx AG	
	Prior Owner / First Owner	PG Zorgholding	
	Prior Owner / First Owner	Relicense AG	
	Prior Owner / First Owner	ThyssenKrupp AG	

The submitting company has confirmed to us in writing to be the unrestricted owner of the listed License ID (as stated above), as seen in the Microsoft documentation (Perpetual License Transfer Form).

Furthermore, the submitting company confirmed to us that the listed licenses are no longer in use and have been completely removed from their devices.

Unterschrift Relicense

**RELICENSE**  
EMPOWERING YOUR SOFTWARE ASSETS  
Relicense GmbH  
Carl-Benz-Straße 5  
82266 Inning | Germany  
www.relicense.com  
Tel. +49 8143 99 14 66-0  
Fax +49 8143 99 14 66-59

Christian Penava, Managing Director

Unterschrift Relicense

Name in capital letters

The transferee specified above confirms by his following signature, that he received and accepts the applicable Microsoft Product-Use-Rights (PUR) and the use- and transfer restrictions as well as the limitations of liability (Contract).

**ARPA PUGLIA**  
C.so Trieste, 27 - 70126 BARI  
C.F. e P.I. 03030420724

  
Signature - authorized person - company stamp

**MICAELA MENEGOTTO**  
Name in capital letters

# Perpetual License Transfer Form 2022-10342

Not for use with version 5 agreements or earlier

Date of Transfer  
(Customer to complete)

13.08.2021

Proposal ID  
(Microsoft to complete)

M16-

This Perpetual License Transfer Form is submitted according to the Microsoft License ID (e.g., Agreement, Enrollment, PCN) identified in Annex A. This form identifies perpetual licenses to be transferred to the entity identified below (the "transferee"). Customer must complete Annex A to this form. The asterisks (\*) indicate required fields.

## 1. Customer.

Name of entity\* Relicence GmbH  
Contact name\*: First Christian Last Penava  
Contact email address\*  
Street address\* Carl-Benz-Str. 5  
City\* Inning Postal code\* 82266  
Country\* Germany  
Phone\* +49 8143 9914660 Fax +49 8143 99146659

## 2. Transferee.

Name of entity\* Agenzia Regionale per la Prevenzione e la Protezione dell'Ambiente  
Contact name\*: First Emanuela Last Laterza  
Contact email address\*  
Street address\* Corso Trieste 27  
City\* Bari Postal code\* 70126  
Country\* Italy  
Phone\* Fax  
Transferee Agreement or Enrollment number (if any)

## 3. Reason for License transfer.

- ☐ Transfer to an Affiliate  
☐ Divestiture

- ☐ Acquisition or Government reorganization
- ☐ Merger or Government privatization
- ☐ Consolidation
- ☐ Outsourcer (Not applicable for Open License)

If the terms of the Customer's Agreement or Enrollment provide any other basis for transfer, entity may select "Other" below and provide a reason for the transfer request. Microsoft will evaluate the request. If approved, Microsoft will sign below.

☒ Other: Reason Required:

For your information only and transparency reasons. The licenses listed in Annex A of this document are transferred based on the Court of Justice of the European Union (ECJ) ruling, 3 July 2012, C-128/11.

#### 4. Customer and Transferee Acknowledgements.

Customer and transferee acknowledge that Microsoft's receipt of this form does not constitute: (1) authorization to transfer rights to upgrades obtained through Software Assurance (SA) coverage or License & Software Assurance (L&SA) prior to the expiration or renewal of your enrollment; (2) Microsoft's agreement to grant perpetual rights for any prorated number of licenses on early termination; nor (3) validation of transferred licenses based on invalid or inaccurate information in Annex A regarding license status. Customer may not use this form to transfer rights to Software Assurance ("SA") and/or License & Software Assurance ("L&SA") upgrade.

Customer details and not affiliates who are sublicensed to use those products; should be listed on this form in order for the transfer to be valid.

Customer remains liable for amounts owed for any perpetual Licenses acquired through MS Financing.

By signing below, Customer represents and warrants that:

- a. Customer is transferring only fully paid, perpetual licenses. Customer should refer to the "License Grant" section of their agreement to ensure the license intended for transfer are perpetual.
- b. Customer is not transferring
  - (i) Licenses on a short-term basis (90 days or less);
  - (ii) temporary rights to use Products;
  - (iii) Software Assurance coverage or benefits;
  - (iv) perpetual Licenses for any version of any Product acquired through Software Assurance separately from the underlying perpetual Licenses for which that Software Assurance coverage was ordered;
  - (v) upgrade Licenses for a desktop operating system Product separately from the underlying desktop operating system license or from the computer system on which the Product was first installed;



(vi) full version desktop operating system licenses, unless transferred with the sale of the device for which it operates;

(vii) Online Services; or

(viii) any licenses for resale to unaffiliated third parties.

c. This transfer is made according to the above restrictions and all other terms of the Microsoft agreement identified above.

d. The information provided in this notice is complete and accurate.

e. Customer has provided the transferee with a copy of the applicable product use rights and notice regarding the use and transfer restrictions, and limitations of liability specified in the agreement.



f. Customer no longer uses licenses identified in Annex A.

This transfer is only valid if representations and warranties made above are true and accurate.

Customer and Transferee acknowledge that they shall be wholly responsible to collect, bear and pay any and all taxes levied or based in any way upon the transfer of the licenses and that Microsoft shall have no liabilities of any nature whatsoever related to such taxes.

The transferee, by signing below, acknowledges acceptance of the applicable product use rights, use and transfer restrictions, and limitations of liability. Microsoft reserves the right to audit transferee's compliance with such use and transfer restrictions. Volume Licensing Keys or media are not provided to transferee with the transfer of licenses.

Please sign this notice in triplicate. Submit one signed original to Microsoft, as directed above, and the remaining signed originals are to be retained by Customer and transferee for license management and record keeping purposes. If Microsoft approval is required, Microsoft will return a signed copy back to Customer.

Customer	Transferee
<b>Name of Entity</b> Relicence GmbH	<b>Name of Entity</b> Agenzia Regionale
<b>Signature</b> 	<b>Signature</b> 
<b>Printed Name</b> Christian Penava	<b>Printed Name</b> MENEGETTO MICHAELA
<b>Printed Title</b> Manager	<b>Printed Title</b> ARPA PUGLIA
<b>Signature Date</b> 13.08.2021	<b>Signature Date</b> C.so Trieste, 27 - 70126 BARI G.F. e P.I. 05930420724

no



**Microsoft Ireland Operations Limited**

(Microsoft will only sign if "Other" is given as the reason for transfer in Section 3 and it approves of the transfer)

Signature \_\_\_\_\_

Printed Name

Printed Title

Signature Date

**Microsoft Internal Use Only**

Reference number

Original signed transfer form to be sent to the following Microsoft Address by the entity who transacted the orders.\*

\*Microsoft accepts the Perpetual License Transfer Forms from direct EA customers and direct Partners only. For Open Programs, Customer needs to submit the completed form to reseller.

**Microsoft Ireland Operations Limited**

Atrium Building Block B

Camdenhall Road

Sandyford Industrial Estate

Dublin 18, Ireland

Attention: EOC Program Operations Dept.

One copy of the transfer form is provided to Customer's local Microsoft representative in the event Microsoft's approval and signature is required.

## Annex A to Notice of Perpetual License Transfer

Complete the table by filling in the blanks below.

License ID	For the purposes of this form, "Licensing ID" is the Enrollment number, Open Value and Open Value Subscription Agreement number, Open License Authorization/License Number combination, or Select Plus Public Customer Number (PCN) under which the licenses were purchased.
Product, part number, product type, version, language and initial country of usage columns	Enter the product name, part number, product type, version, language, and country of usage exactly as they appear on the License Detail page on the Microsoft Volume Licensing Services site located at <a href="https://www.microsoft.com/licensing/servicecenter">https://www.microsoft.com/licensing/servicecenter</a> . In the case of upgrades obtained through Software Assurance coverage or L&SA, in the "Version" column, insert the latest version of the product made available during your contract term.
Number of licenses	Enter number of licenses you are transferring.

### Perpetual Licenses Transferred

License ID	Product name	Part number	Product type	Version	Language	Initial country of use	Number of Licenses
4144158	OfficeProPlus ALNG LicSAPk MVL	269-05623	L and SA	2007	aling	GERMANY	
5543743	OfficeProPlus ALNG SA MVL Pltfrm	269-12442	Software Assurance (SA)	2010	aling	GERMANY	
88775374	OfficeProPlus ALNG SA MVL Pltfrm	269-12442	Software Assurance (SA)	2013	aling	GERMANY	
6809597	OfficeProPlus ALNG SA MVL Pltfrm	269-12442	Software Assurance (SA)	2019	aling	GERMANY	8
							ThyssenKrupp

Please attach an additional page (Annex A or in Excel format) to this notice, if you need more space.

\*Where SA is indicated, only the latest version acquired through SA at the time of transfer can be transferred. Earlier versions of product with SA are not transferable. SA which is associated with an already listed L&SA are not to be listed or transferred. SA coverage itself is not transferable. SA coverage ends on the date of transfer.



Al Dott./RUP Fabio Scattarella  
Dirigente Responsabile della U.O.S  
Patrimonio ed Economato  
Sede

**OGGETTO: Fornitura di n. 8 licenze RELICENSE Microsoft Office 2019 Professional Plus nella versione che ricomprende Word, Excel, Powerpoint, Outlook, Publisher e Access – ESTENSIONE FORNITURA**  
**Attestazione di regolare esecuzione della prestazione da parte della ditta SISTEMI H.S. S.p.A.**

**C.I.G. Z392EDEE52**

In relazione al contratto stipulato a mezzo RdO n. 2676296/2020 su Me.P.A., la sottoscritta, in qualità di Direttore dell'Esecuzione, attesta che la Ditta SISTEMI H.S. S.p.A., corrente in Torino – Corso L. Einaudi n. 30 (P.IVA 07393280016, ha eseguito la prestazione dedotta in obbligazione, oggetto dell'affidamento, nei termini e nei modi contrattualmente prescritti.

Tanto premesso, invita il Dirigente Responsabile della U.O.S. Patrimonio ed Economato –Dott. Fabo Scattarella-, a provvedere alla predisposizione dell'atto di liquidazione e pagamento della fattura n. 2047 FTE del 31/08/2021 di € 1.744,00, iva esclusa, pari ad € 2.127,68, iva al 22% inclusa, emessa dalla Ditta per il pagamento del corrispettivo contrattualmente dovuto.

Distinti saluti.

Il Direttore dell'Esecuzione  
***Dott.ssa Micaela Menegotto***

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**Agenzia Regionale per la Prevenzione e la Protezione dell'Ambiente**  
Sede legale: Corso Trieste 27, 70126 Bari  
Tel. 080 5460111 Fax 080 5460150  
[www.arpa.puglia.it](http://www.arpa.puglia.it)  
C.F. e P. IVA. 05830420724

## Durc On Line

Numero Protocollo	INPS_26528361	Data richiesta	12/06/2021	Scadenza validità	10/10/2021
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Denominazione/ragione sociale	SISTEMI HARDWARE & SOFTWARE S.P.A.
Codice fiscale	07393280016
Sede legale	CORSO L EINAUDI 30 TORINO TO 10129

Con il presente Documento si dichiara che il soggetto sopra identificato **RISULTA REGOLARE** nei confronti di

I.N.P.S.  
I.N.A.I.L.

Il Documento ha validità di 120 giorni dalla data della richiesta e si riferisce alla risultanza, alla stessa data, dell'interrogazione degli archivi dell'INPS, dell'INAIL e della CNCE per le imprese che svolgono attività dell'edilizia.