

Template Notification of employees before employment within a Moldova IT Park's resident

[date]

To the attention of [candidate's name, surname]

Notification about the peculiarities of social and medical insurance, as well as the peculiarities of personal income tax of an employee hired within Moldova IT Park's resident

Hereby, [Resident's name] [IDNO _____], informs you that is a resident of the Information Technology Park "Moldova IT Park" since [date of becoming resident] being registered with the number [number].

In this regard, in compliance with the provisions of Law no. 77 on information technology parks, we inform you about the peculiarities of social and medical insurance, as well as the peculiarities of personal income tax before your employment within [Resident's name]. Thereby, during the period of holding the resident's title of Information Technology Park "Moldova IT Park" by [resident's name]:

1. no tax deduction will be done from your salary.
2. your salary incomes from income tax perspective are nil of the obligation of declaring and additionally taxing them, being finally taxed;
3. as an employee, you will not benefit from exemptions established in art. 33-35 Tax Code, you will not transmit these exemptions to your husband/wife, you will not use at another job or include in Income tax declaration (if that is submitted by the employee by his own initiative or by virtue of the circumstances which determine this necessity);
4. the income tax from the salary will be recalculated by excluding any previously considered exemptions (if applicable);
5. you, as an employee, benefit from all types of state social insurance benefits from the state social insurance budget, according to the legislation in force;
6. the amount of the insured monthly income considered when determining the calculation basis of social benefits is 68% of the amount of the average monthly salary per economy, forecast for that year (in 2022, $68\% * 9900 \text{ lei} = 6732 \text{ lei}$);
7. you hold the status of insured person in the system of compulsory health insurance in the general established way.

We will inform you accordingly about the date of loss [name of the resident] of the resident title of the Information Technology Park "Moldova IT Park".

Signature of the administrator _____

The candidate has been acknowledged with this information for which he/she has signed:

Signature of the candidate: _____