**ANEXO N° 1**

**FORMULARIO ÚNICO POSTULACIÓN A LA LÍNEA DE RECOSTRUCCIÓN DE INFRAESTRUCTURA CULTURAL (FUP)**

**VERSIÓN – 2017**

**ANTECEDENTES GENERALES**

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| **TÍTULO DEL PROYECTO** |
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| **CAUSAL Y FECHA DE LA CATÁSTROFE QUE LO HABILITA PARA POSTULAR A ESTA LÍNEA** |
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| |  |  |  |  | | --- | --- | --- | --- | | **IDENTIFICACIÓN DEL INMUEBLE A INTERVENIR** | | | | | **NOMBRE DEL INMUEBLE (SI CORRESPONDE)** |  | | | | **NOMBRE COMPLETO DEL PROPIETARIO** |  | | | | **RUT PROPIETARIO** |  | | | | **DIRECCION INMUEBLE** |  | | | | **COMUNA INMUEBLE** |  | | | | **REGION INMUEBLE** |  | | | | **ROL AVALUO S.I.I**  **(Salvo que sea Bien Nacional de Uso Público)** |  | | | | **INSCRITO A FOJAS EN EL CONSERVADOR DE BIENES RAICES DE** | REGIÓN Y COMUNA | N° | AÑO | |  |  |  | | **PROTECCION LEY N° 17.288 DE MONUMENTOS NACIONALES, Y/O A LA LEY GENERAL DE URBANISMO Y CONSTRUCCIONES**  **SEGÚN DECRETO** | |  |  | | --- | --- | | SI | NO | |  |  |  |  |  | | --- | --- | | N° | AÑO | |  |  | | | | | **PROYECTO REQUIERE INFORME ESTRUCTURAL** | |  |  | | --- | --- | | SI | NO | |  |  | | | | |

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| |  |  | | --- | --- | | **IDENTIFICACIÓN DEL POSTULANTE** | | | **NOMBRE** |  | | **RUT** |  | | **DIRECCIÓN** |  | | **COMUNA** |  | | **E-MAIL** |  | | **REPRESENTANTE LEGAL** |  | | **RUT REPRESENTANTE LEGAL** |  | |

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| |  |  | | --- | --- | | **IDENTIFICACIÓN DEL JEFE DE PROYECTO** | | | **NOMBRE** |  | | **RUT** |  | | **PROFESIÓN** |  | | **TELÉFONO** |  | | **DIRECCIÓN** |  | | **COMUNA** |  | | **E-MAIL** |  | |

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| |  |  | | --- | --- | | **DETALLE DE FINANCIAMIENTO** | | | **PRESUPUESTO TOTAL DEL PROYECTO** | |  | | --- | | **$** | | | **MONTO SOLICITADO AL CNCA** | |  | | --- | | **$** | | | **COFINANCIAMIENTO COMPROMETIDO APORTES PROPIOS EN DINERO**  **(VOLUNTARIO)** | |  | | --- | | **$** | | | **COFINANCIAMIENTO COMPROMETIDO APORTES PROPIOS VALORADO**  **(VOLUNTARIO)** | |  | | --- | | **$** | | | **COFINANCIAMIENTO COMPROMETIDO**  **APORTES DE TERCEROS (VOLUNTARIO)** | |  | | --- | | **$** | | |

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| |  |  | | --- | --- | | **MEDIOS DE NOTIFICACIÓN** | | | **MEDIO PREFERENTE DE NOTIFICACIÓN (CORREO ELECTRONICO/DOMICILIO). EN CASO QUE SE INDIQUE CORREO ELECTRONICO DEBEN INDICARSE DOS.** | |  | | --- | | **DOMICILIO** | | | |  | | --- | | **CORREO ELECTRÓNICO 1:**  **CORREO ELECTRÓNICO 2:** | | |

* **TODOS LOS CAMPOS DEBEN SER DEBIDAMENTE COMPLETADOS**

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**FIRMA REPRESENTANTE LEGAL POSTULANTE**