**Please read the instructions below carefully**

INSTRUCTIONS FOR USING THE FORM

1. You may not in any other way than as instructed below add information to this document, or otherwise alter or modify this document.
2. Fill only out the fields indicated in blue (as applicable).
3. Mark with x in all blue fields where you don’t fill out information.
4. All sums shall be stated in euro only.
5. All sums shall be stated without Value added tax (VAT). EFI will, where applicable, pay VAT in addition to the sums stated.
6. Please note that all sums are binding for you and EFI is under no obligation to renegotiate these.

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| --- |
| 1. **FEES**
* *the quoted fee shall be all-inclusive (with the exception of the per diems under B. and reimbursable costs under C. below)*
* *full general conditions applicable to the payment of fees can be found in Annex 8*
* *lines may be added as needed*
 |
| **Name of Expert** | **Daily rate (EUR)** | **Number of units** | **Unit** | **Total fee (EUR)** |
|  |  |  | day |  |
|  |  |  | day |  |
|  |  |  | day |  |
|  |  |  | day |  |
| **Total fees (EUR)** |  |
| 1. **WORK PLAN BUDGET**
 |
| **Cost item** | **Unit cost (EUR)** | **Number of units**  | **Unit** | **Total work plan budget****(EUR)** |
| Work plan budget is used cover costs related to domestic travel (including per diem/accommodation) and costs of meetings, workshops and associated expenses (the use of work plan budget requires prior approval from EFI in writing.) | 20,000 | x | x | 20,000 |
| **Total work plan budget (EUR)** | 20,000 |
| **TOTAL (EUR)****=Total fees + Total work plan budget**  |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature**

Representative authorized to sign on behalf of the Tenderer/Consortium leader, as stated in the identification form