Please complete Table 1, below, to show a breakdown of your cost per task (i.e. ‘rates’) and the number of days for each task, and total cost for each task required to deliver this requirement. You may insert additional task lines if required.

Please state the total overall cost for this requirement. Prices should exclude VAT.

Table 1: Commercial Response (to be completed by Supplier)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Description of tasks |  | | Staff costs | |  | Total cost per task |
| Grade | Day rate | | No. Days | |
| Inception meeting |  |  | |  | |  |
| Sample testing |  |  | |  | |  |
| Production of signed off report |  |  | |  | |  |
|  |  |  | |  | |  |
|  |  |  | |  | |  |
|  |  |  | |  | |  |
|  |  |  | |  | |  |
| Total costs | | | | | |  |
| Expenses or other costs (please detail type, e.g. travel, consumables ) | | | | | |  |
| Discounts applied (please detail) | | | | | |  |
| Total Overall Cost | | | | | |  |