

RCloud Tasking Form – Part C: Task Response Form

TO BE COMPLETED BY THE BIDDER

1. Proposal

| | |
|-------------------------------|-------------------------------------------------------------------|
| Registered Company Name | Awerian Limited |
| Registered Address | Awerian Ltd Melbourn Science Park Melbourn SG8 6EE UK |
| Registered Company Number | 13173806 |
| Proposal Reference (attached) | A21-8-9-1 |
| Proposed Task Start Date | 13/09/2021 |
| Proposed Task End Date | 28/02/2022 |

2. Cost Proposal

SUMMARY

| TOTAL COST OF TASK | |
|----------------------------------------------------------------------------------------------|---------|
| Firm Price Quotation (ex VAT) – <u>Core Activity Only</u> | £99,500 |
| Firm Price Quotation (ex VAT) – <u>Including Options (if applicable)</u> | £ |
| OR | |
| Ascertained Cost (maximum price payable (ex VAT)) – <u>Core Activity Only</u> | £ |
| Ascertained Cost (maximum price payable (ex VAT)) – <u>Including Options (if applicable)</u> | £ |

COST BREAKDOWN

Please provide a full breakdown of all costs associated with this Task. Inserting additional rows into the Table below, as required

Please identify whether each row forms part of the Task core activity or is an optional item.

| PROVISION FROM SERVICE | Hourly Rate | Quantity | Sub-Total | Core/Option |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------|-----------|-----------------|
| Manpower (insert rows below as appropriate) | | | | |
| Each row should identify the relevant RCloud Role Description (as per the Pricing Matrix within the RCloud Portal) e.g. "Head or School or Director" | | | | |
| Please identify each role, rates and number of hours. Hourly rate must be inclusive of profit and overhead. (Not to exceed the maximum rates stated in your Pricing Matrix within the R-Cloud Portal) | | | | |
| Project Lead (Senior Principal) | REDACTED UNDER FOIA EXEMPTION | | | |
| Consultant RF Engineer (Principal) | | | | |
| Consultant Physicist (Principal) | | | | |
| Travel & Subsistence (Incl. UK Road Mileage, Accommodation) | | | | |
| Transportation (provide detail) | | | | |
| Range Facility (provide detail) | | | | |
| Materials and Equipment (provide detailed list) | | | | |
| Other (provide supporting detail) | | | | |
| PROVISION FROM SUBCONTRACTORS | Cost | Quantity | Sub-Total | Core/Option |
| Range Facility (provide detail) | | | | Choose an item. |
| Manpower – identify Each Grade, rates and number of hours (based on your Rate Card) | | | | Choose an item. |
| Travel & Subsistence (Incl. UK Road Mileage, Accommodation) | | | | Choose an item. |
| Transportation (provide detail) | | | | Choose an item. |
| Range Facility (provide detail) | | | | Choose an item. |
| Materials (provide detail) | | | | Choose an item. |
| Other (provide detail) | | | | Choose an item. |
| ADDITIONAL CHARGES | | | | |

| | | | | |
|-------------------------------------------------------------------|--|--|--|--|
| Handling Fee for sub-contracting in accordance with agreed rate | | | | |
| INFORMATION ONLY: | | | | |
| General Administration / Overheads in accordance with agreed rate | | | | |
| Agreed Profit in accordance with agreed rate | | | | |

Assumptions and Dependencies (if applicable)

Face-to-face meetings will take place at the Awerian offices near Cambridge
In accordance with Schedule 3 Clause 23.4 of the terms of business, Awerian has prepared this proposal on the assumption that an agreement can be made to cap the Supplier's Liability at 150% of the contract value.

Milestone (M/S) Payment Notes:

- 1) Dstl will not make any form of Payment on Contract award.
- 2) M/S Payment cost to be qualified as Value for Money (VFM) justifiable charge.
- 3) Where Equipment is purchased in support of this Task, full payment will only be made following Contractor confirmed receipt of Equipment. If a deposit has to be paid at time of Contractor placing the Order, then this deposit payment, at the Authority's discretion, may be approved if supported by documentation as proof of Contractor payment.
- 4) For tasks of less than 6 month duration, M/S payments are at the discretion of the Authority.

3. Additional Information

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 3.1 | Government Furnished Assets (GFA) |
| <p>Please state below whether GFA is required from the Authority. If 'Yes', please provide a complete list. All GFA must be recorded in a formal list whilst in the possession of the Contractor.</p> <p>For any purchased materials which will become GFE, please provide the known pricing within section 2. Cost Proposal.</p> | |
| <p>GFA to be Issued - No</p> <p>If 'yes' – add details below. If 'supplier to specify' or 'no,' delete all cells below.</p> | |
| <p>If 'Yes' – provide details here.</p> | |
| 3.2 | Contractor's Personnel and Government Establishments |
| <p>If performance of the Contract requires access to the Authority's site(s) please confirm insurance is in place in accordance with the R-Cloud Agreement Terms and Conditions</p> | |
| <p>Access Not Required</p> | |
| 3.3 | Commercially Sensitive Information |

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| Is any Commercial Sensitive Information included within your proposal? | |
| No | |
| If 'Yes', please provide the following information: | |
| Description of Commercially Sensitive Information: | |
| Cross Reference(s) to location of sensitive information in proposal: | |
| Explanation of Sensitivity: | |
| Details of potential harm resulting from disclosure: | |
| Period of Confidence (if applicable): | |
| Contact Details for Transparency/Freedom of Information matters: Name: Position: Address: Telephone Number: Email Address: | |
| 3.4 | Security - Research Workers Process |
| For Tasks where a Research Workers Form has been provided, please complete and return as per the process outlined in Part A (Task Overview). One form is required per Research Worker. | |

Please return the completed Tasking Response Form by via the RCloud Portal for the relevant task.

Acceptance by the Authority of the proposal to the bidder will be through the issue of an R-Cloud notification containing a purchase order number, which must be quoted on any relevant invoices.

The RCloud (version 4) Agreement Terms and Conditions shall apply