

**FORMULÁŘ DODAVATELE PRO EVIDENCI KVALIFIKOVANÝCH FIREM**

*Vyplněný formulář, prosím, zasílejte na adresu:* *dodavatel@pmo.cz**.*

**1. Identifikační údaje dodavatele**

Název dodavatele:

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IČ:

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Telefon:

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Osoba oprávněná jednat za dodavatele:

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E – mail:

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**2. Charakteristika dodavatele (popis činnosti, zaměření a specializace dodavatele):**

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Počet zaměstnanců:

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Teritoriální působnost dodavatele:

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**3. Reference, uveďte nejméně 3 relevantní reference v požadované struktuře** (v případě potřeby pokračujte, prosím, na volném listě)

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| Název akce:

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Objednatel:

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Kontaktní osoba objednatele:

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Cena:

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Místo a doba realizace:

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Stručný popis akce:

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Kontaktní osoba objednatele:

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Místo a doba realizace:

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Stručný popis akce:

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| Název akce:

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Kontaktní osoba objednatele:

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Cena:

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Místo a doba realizace:

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Stručný popis akce:

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**4. Přehled technických zařízení a prostředků dodavatele (mechanizace, strojní vybavení):**

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**5. Rozsah relevantních živnostenských oprávnění:**

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**6. Odborná způsobilost zaměstnanců dodavatele:**

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