**Document to be returned**

**Pricing Questionnaire for**

TC1067 – The Provision of the Under 18’s Physical Activity on Referral Service (PARS)

|  |  |
| --- | --- |
| **Contact Name** |  |
| **Name of Organisation** |  |
| **Role in Organisation** |  |
| **Phone Number** |  |
| **E-mail address** |  |
| **Postal address** |  |
| **Signature (electronic is acceptable)** |  |
| **Date** |  |

**Pricing Instruction**

Tenderers are asked to complete the pricing table below.

**Prices quoted must anticipate all costs in relation to the provision of the Service as**

**NO additional costs will be accepted unless approved in writing by the Council.**

**Budget**

Please note there is a maximum budget of **£160,000.00 pa** available for this service.

Any bid(s) received in excess of this figure will not be considered further

**The price evaluation will be based on the annual cost.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Price Schedule** | | | |
| **Contract Title:** | **The Provision of the Under 18’s Physical Activity on Referral Service (PARS)** | | |
| **Ref:** | **TC1067** | | |
| **Company Name:** |  | | |
| **Contact Name:** |  | | |
| All prices stated must be exclusive of VAT. | | | |
| Prices must include for all cost in provision of the contract as no additional costs will be accepted unless approved in writing by Manchester City Council, additional costs must be declared in the tender documents for these to be considered. | | | |
| **Please provide a spreadsheet containing a detailed breakdown of all costs for your proposed service including Staff costs (wages, sickness, training, pension etc.), Recruitment cost, General office expenses (telephones, IT systems, stationary etc.), Management costs, Any other costs not included in the above.** | | | |
| **Please confirm your tendered price per annum for the provision of the Under 18’s Physical Activity on Referral Service (PARS)** | | | **£ pa** |
| **Signature:** | |  | **Date:** |
| **Full Name (printed):** | |  | |
| **Designation:** | |  | |
| **Organisation:** | |  | |
| **Telephone:** | |  | |
| **Email:** | |  | |

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| --- |
| **End of pricing questionnaire** |