|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ÍTEM** | **DESCRIPCIÓN** | | **UNIDAD** | **CANTIDAD** | **VALOR UNITARIO** | **SUBTOTAL** |
| 1 | Suministro |  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2 | Instalación |  |  |  |  |  |
| 3 | Personal (Residente) |  |  |  |  |  |
| **IVA** | | | | |  | |
| **VALOR TOTAL** | | | | |  | |

**VALOR TOTAL DEL PROYECTO** (en letras y números)

Atentamente,

Nombre o Razón Social del PROPONENTE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre del Representante\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NIT o Cédula de Ciudadanía No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de\_\_\_\_\_\_\_\_

Dirección\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ciudad \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teléfono \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correo electrónico \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRMA REPRESENTANTE LEGAL