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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Приложение № 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Спецификация к договору № | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | |  | |  | | |  | |  |  |  |  | |  |  |  |  | |
|  | Перечень МТ с расчетом стоимости услуг | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Муниципальное автономное дошкольное образовательное учреждение "Детский сад № 449 "Олимпиец" г.Челябинска" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | |  | |  | | |  | |  |  |  |  | |  |  |  |  | |
|  | № п/п | | Наименование медицинской техники | | | | | | | | | | | | | | | | | Кол-во | | | | | Год выпуска | | | | Заводской номер | | | Цена ТО в год, руб. за физ.ед. | | | | | Сумма ТО в год | | | | |  | |
|  | № п/п | | Наименование медицинской техники | | | | | | | | | | | | | | | | | Кол-во | | | | | Год выпуска | | | | Заводской номер | | | Цена ТО в год, руб. за физ.ед. | | | | | Сумма ТО в год | | | | |  | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | 1 | | ТО Ингалятор профессиональный MEDEL Pro | | | | | | | | | | | | | | | | | 1 | | | | | 2 010 | | | | 057539 | | |  | | | | |  | | | | |  | |
|  | 2 | | ТО Ингалятор профессиональный MEDEL Pro | | | | | | | | | | | | | | | | | 1 | | | | | 2 010 | | | | 057537 | | |  | | | | |  | | | | |  | |
|  | 3 | | ТО Облучатель ультрафиолетовый стационарный для облучения верхних дыхательный путей и полости уха ОУФну-"ЭМА-Е" | | | | | | | | | | | | | | | | | 1 | | | | | 2 004 | | | | 2452 | | |  | | | | |  | | | | |  | |
|  | Стоимость обслуживания в год: | | | | | | | | | | | | | | | | | | | 3 ф.е. | | | | |  | | | |  | | |  | | | | |  | | | | |  | |
|  | Итого с 1 января 2019 г. по 31 декабря 2019 г. | | | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | |  | | | | |  | | | | |  | |
|  | НДС не предусмотрен | | | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | |  | | | | |  | | | | |  | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | |  | |  | | |  | |  |  |  |  | |  |  |  |  | |
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|  |  | Заказчик | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  |  | Муниципальное автономное дошкольное образовательное учреждение "Детский сад № 449 "Олимпиец" г.Челябинска" | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | |  | |  | | |  | |  |  |  |  | |  |  |  |  | |
|  |  | | | | | | | | | | | | | | | | | | |  | | Заведующий \_\_\_\_\_\_\_\_\_\_\_\_\_ (Шумахер Е.В.) | | | | | | | | | | | | | | | | | | | |  | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | |  | |  | | |  | |  |  |  |  | |  |  |  |  | |
|  |  | | | |  |  |  |  |  |  | | | | | |  |  |  |  | | м.п. | | | | | | |  | | |  | |  |  |  |  | | | | | | |