

DRAFT ORDER FORM Nr XXXX for the PURCHASE of XXXXXX

In execution of Framework Contract EMSA/OP/09/2014 signed with XXXXXXXXXX in force from XX/XX/XXXX to XX/XX/XXXX.

The Order Form is governed by the provision of the Framework Contract only.

Acceptance of this Order implies that the contractor waives all other terms of business.

Internal order number:

Number of sheets:

The present Order Form is drawn for the purchase of the hereunder specified equipment:

Position	Product reference	Description/type	Internal/E xternal element I/E	Qty	Net Unit price €	TOTAL PRICE €	For information		
							Type of maintenance	Annual maintenance Unit cost €	Guarantee months
A	B	C	D	E	F	J(G) +(I)	K	L	M
1					0,00	0,00	N/A	N/A	12
2					0,00	0,00	N/A	N/A	12
3					0,00	0,00	N/A	N/A	12
						Sous-total:			
						Packaging:			
					Insurance:				
					Transport:				
					Assembly:				
					VAT:				
					TOTAL:		0,00		

Project name:

Invoicing address

European Maritime Safety Agency (EMSA)
Invoice Registration (IR)
Unit A.2, Legal & Financial Affairs
Praça Europa 4
1249-206 Lisbon - Portugal

Delivery address:

European Maritime Safety Agency (EMSA)
Praça Europa 4
1249-206 Lisbon - Portugal

Delivery time: XXXXXXXXX

Terms of payment :

Responsible person for EMSA:

Name of purchasing officer:

Name of financial officer:

Name of technical officer:

Responsible person for the contractor:

Phone number:

Phone number:

Phone number:

Phone number:

Persuant to the provisions of Articles 3 & 4 of the Protocol on the Privileges and Immunities of the European Communities and European Maritime Safety Agency is exempt from all taxes and dues. This includes VAT on payments due in respect to this Order Form.

The present Order Form shall enter into force on the date on which it is signed by the last contracting party

Remarks (if any)

For the contractor: [Company name /forename/surname/function]

Date:

For Emsa: [Insert name and title of the Authorising Officer]