|  |  |  |
| --- | --- | --- |
| Part 1 | Representative Identification |  |
|  | Representative Name |  |
|  | Last Name | Given Name | Middle Name |  |
|  |  |  |  |  |
|  | Identification Number  | E-mail Address |  |
|  |  |  |  |
|  | Phone Number | Fax Number |  |
|  |  |  |  |
|  | Company's Name |  |  |
|  |  |  |
|  |

The above identified company through its accredited representative makes a proposal of **GLOBAL PRICE** for 268 flight simulator training hours, without instructor (DRY), and Simulator Operators Training (IOS) for 4 instructors, with availability exclusively to the GABAER pilots, in the **VC-2 (EMB-190)** aircraft, aiming to fulfill the COMAER needs, in accordance with terms, quantities, and other applicable requirements established in the BASIC PROJECT, Annex I of Invitation for Bid **186038/CABW/2018.**

|  |  |  |  |
| --- | --- | --- | --- |
| Part 2 | Statements | Initial of the representative |  |
| 1- | The amount presented as an ESTIMATED AMOUNT does not indicate any future commitment by BACW and was obtained from estimated values. The service quoted shall include all costs arising from the performance of the services, whether direct or indirect, including but not limited to what is described below: all inputs such as fees and/or taxes of invoice, social contributions, duties and taxes, insurance, administrative fees, permits, and all other fees necessary for full compliance with the object of the INVITATION, in accordance with the Basic Project | (place initial) |  |
| 2- | We hereby acknowledge the content of INVITATION TO BID and its Annexes, fully and irrevocably accepting its terms and requirements, as well as all relevant legislation.This price proposal shall be valid for **60 (sixty) days** starting on the date on which proposals are opened, after which time it shall be subject to confirmation by our Company. | (place initial) |  |
| 3- | The company declares that it will meet all of the requirements listed in the Bid Announcement and Basic Project, Annex I of the Invitation to Bid **186038/CABW/2018.** | (place initial) |  |
|  |

|  |  |  |
| --- | --- | --- |
| Part 3 | Bank Information |  |
|  | Bank Name: |  |
|  |  |  |
|  | Branch: | Checking Account: |  |
|  |  |  |  |
|  | Other: |  |
|  |  |  |
|  |

|  |  |  |
| --- | --- | --- |
| Part 4 | Price Proposal |   |
|   | **AIRPLANE** | **MAXIMUM AMOUNT OF HOURS** | **UNIT PRICE** | **TOTAL PRICE** |  |
|   | EMB-190 / VC-2FFS EMB-190 LEVEL DHEADUP DISPLAY (HGS COMBINER)  | 268 | US$ | US$ |  |
|  | **IOS** | **MAXIMUM AMOUNT** | **UNIT PRICE** | **TOTAL PRICE** |  |
|  | Simulator Operators Training (IOS)\* | 4 | US$ | US$ |  |
|  | **GLOBAL PRICE\*\*** | US$ |  |
|   |  |
|  | \*\*The GLOBAL PRICE must be achieved by adding the total price for the instruction of 4 people on SIMULATOR OPERATORS TRAINING and the TOTAL PRICE of the FLIGHT SIMULATOR training for 268 hours. |  |
|  | \* The Bidder may offer cost zero for Simulator Operators Training (IOS) |  |
|   |   |   |   |   |   |

|  |  |  |
| --- | --- | --- |
| Part 5 | Authentication |  |
|  | Representative printed name |  |
|  |  |  |
|  | Representative signature | Date of signing |  |
|  |  |  |  |
|  |  |
|  |