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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Objednávka č.** | | | | | | | | | | **OBJ/100/21/002** | | | | | |
|  | | | | | | | | | | | | | | | |
| **ODBĚRATEL** | | | | |  | **DODAVATEL:** | | | | | | | | | |
|  | | | | |  |  | | | | | | | | | |
|  | Česká republika - Státní zemědělská a | | | |  |  | | **Státní zdravotní ústav se sídlem v Praze** | | | | | |  | |
|  | potravinářská inspekce | | | |  |  | | **Šrobárova 49/48** | | | | | |  | |
|  | 603 00 Brno, Květná 15 | | | |  |  | | **100 42** | | **Praha** | | | |  | |
|  | IČO | 75014149 | |  |  |  | | IČO | | 75010330 | | | | |  |
|  | DIČ | CZ75014149 | |  |  |  | | DIČ | | CZ75010330 | | | | |  |
|  | ze dne | 07.01.2021 | |  |  |  | | | | | | | | | |
|  | Dodací lhůta | 31.12.2021 | |  |  |  | | | | | | | | | |
|  | Místo určení |  | |  |  |  | | | | | | | | | |
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| **Předmět objednávky:** | | | | | | | | | | | | | | | |
| Celoroční rámcová objednávka na provádění laboratorních rozborů - SZÚ | | | | | | | | | | | | | | | |
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| Fakturu zašlete do datové schránky avraiqg nebo na mailovou adresu xxxxxxxxxxxxxxxxx | | | | | | | | | | | | | | | |
| Celková cena: | | | | | | | | | **199 999,00** | | Kč | včetně DPH | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | Jméno a příjmení | | | | Podpis | | | | | |  | | |
| Vyřizuje | | | xxxxxxxxxxxxxxx | | | |  | | | | | |  | | |
| Schválil(příkazce operace) | | | xxxxxxxxxxxxxxx | | | |  | | | | | |  | | |
|  | | | | | | | | | | | | | | | |
| Telefon | | | xxxxxxxxxxxxxxx | | | | | | | | | |  | | |
|  | | | | | | | | | | | | | | | |
| Peněžní ústav | | | Číslo účtu | | | | | | | | | |  | | |
| ČNB | | | xxxxxxxxxxxxxx | | | | | | | | | |  | | |
|  | | | | | | | | | | | | | | | |