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|  |  |  | **Univerzita J. E. Purkyně Pasteurova 3544/1 400 96 ÚSTÍ NAD LABEM Česká republika** | | | | | | | | | | | | PID: | | | | | | |  | | | | | |  |  |  |
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|  |  |  |  |  |  | DIČ: | | | **CZ44555601** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | Konečný příjemce: | | | | | | | | | | | |  |  |  |  |  |
|  |  |  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | **27101 Oddělení ředitele SKM** | | | |  |  |  |  | | **xxx** | | | | | **Tel.: 475287186, Fax:  E-mail: xxx** | | | | | | | | | | | | | | | |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  | **Platnost objednávky do:** | | | | | | | | | **31.10.2021** | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | | | | | | | **15.10.2021** | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | | | | | | | **Příkazem** | | | |  |  |  |
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|  |  |  |  |  | **Objednávka je návrhem na uzavření smlouvy dle § 1731 a násl. zákona č.89/2012 Sb., občanského zákoníku, v platném znění. Je-li plnění dle objednávky vyšší než 50.000,-Kč bez DPH, musí být objednávka dodavatelem bez zbytečného odkladu potvrzena. Uzavřená smlouva, tzn. objednávka i s potvrzením, podléhá povinnosti zveřejnění v registru smluv MV dle zákona č. 340/2015 Sb., v platném znění. ---- Na fakturu uveďte číslo objednávky.  Akceptace dne 4.10.2021** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | Objednáváme modernizaci výměníkové stanice doplněním výměníku tepla MAX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | **Položka** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
|  |  |  |  |  |  | | | | | | | **Množství** | | | **MJ** | | | | | | **Cena/MJ bez DPH** | | | | | | | **Celkem bez DPH** | | | | | | | |  |  |  |
|  |  |  |  |  | modernizace výměníkové stanice doplněním výměníku tepla MAX dle dodané cenové nabídky | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  |  | ***Předpokládaná cena celkem bez DPH*** | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | **Datum vystavení:** | | | | | | | | 01.10.2021 | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | **Vystavil:** xxx Tel.: 475287112, Fax: E-mail: xxx                                                                       ...................                                                                           Razítko, podpis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | . . **Příkazce operace (datum a podpis): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ Správce rozpočtu (datum a podpis):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | **Interní údaje objednatele : 27101 \ 91 \ 0000-27 DČ Oddělení ředitele SKM \ 9 Deník: 20 \ Objednávky (individuální příslib)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
|  |  |  |  |  | Od 1.1.02 jsme plátci DPH ! Odběratel použije plnění v rámci uskutečňování ekonomické činnosti. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |