**PRILOG II: PONUDBENI TROŠKOVNIK**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | | **3** | **4** | **5** | **6** | **7** |
| **Re**  **br.** | **OPIS** | | **Naziv proizvoda/usluge** | **Jed.**  **mjere** | **Količina** | **Jedinična cijena** | **Ukupno (5x6)** |
| 1. | Isporuka plina smjesa propan – butan u spremnike na lokacije Doma zdravlja Varaždinske županije | |  | Kg | 4200 |  |  |
| 2. | Isporuka plina propan u spremnike na lokacije Doma zdravlja Varaždinske županije | |  | kg | 4200 |  |  |
| 2. | Najam spremnika na lokacijama DZVZ Breznica i Donja Višnjica | |  | usluga | 2 |  |  |
|  | | **UKUPNO bez PDV-a :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
|  |
| **PDV: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |  |
|  |
| **UKUPNO S PDV-om:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |  |
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Ime i prezime ovlaštene osobe

M.P.

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Potpis ovlaštene osobe