## **Template 1: AT Provider Standard Quotation Template**

## **1. Quotation Document 2: AT Provider Quotation**

1.1 Background Information			
Assessment Centre Information			1
Assessment Centre			-
Assessor Name			-
Assessor/Assessment Centre Email	 		
Assessment Centre Reference Number	 		-
Student Name	 		-
Course Start Date	 		
Course End Date	 		
AT Provider Information			7
AT Provider Company			
AT Provider Address			
	 		-
AT Provider Contact Name	 		
AT Provider Contact Tel No.	 		
AT Provider Quote ID Number	 		
DSA-QAG Accreditation Certificate			
Number			
Date of Quotation	 		
Length of Course Remaining			
Total Maintenance & Support Period			
Insurance Period			
	 	C	ost
1.2 Laptop Description		Ex VAT	Inc VAT
	 	C	ost
1.3 Desktop Description		Ex VAT	Inc VAT

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		Cost		
1.4 Software Description	Ex VA	Ex VAT Inc VAT		

		Cost	
1.5 Printer/Scanner Description		Ex VAT	Inc VAT
		Cost	
1.6 Digital Recorder Description		Ex VAT	Inc VAT
		Cost	
1.7 Ergonomic Equipment & Input Devices Description		Ex VAT	Inc VAT
	_		
	_	Cost	
1.8 Equipment for Hearing Impaired Clients Description		Ex VAT	Inc VAT
	_		
· · · · · · · · · · · · · · · · · · ·		Cost	
1.9 Equipment for Visually Impaired Clients Description		Ex VAT	Inc VAT

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	Cost	
	Ex VAT	Inc VAT

			Cost	
<ul> <li>1.11 Delivery, Set Up &amp; Familiarisation</li> <li>Please delete as applicable: <ol> <li>Standard Delivery &amp; On Site</li> <li>Assembly (1.5 hours)</li> </ol> </li> <li>Extended Delivery &amp; On Site</li> <li>Assembly (up to 2 hours)</li> </ul>	one timed ap 2. Courier with later on that	up and familiarisation in pointment setup and familiarisation same day setup and familiarisation	Ex VAT	Inc VAT
	4. Delivery Only	/	Ex VAT	Inc VAT
	Total	Cost of Equipment Quote		

		Cost		
1.12 Assistive Technology Training	No. of Sessions (In 2 hour blocks <sup>*</sup> )	Ex VAT	Inc VAT	
Description				
Please record below onsite or remote				
training				
		Ex VAT	Inc VAT	
	Total Cost of Training Quote			