**Prilog 1.**

OBRAZAC PONUDE

Naručitelj: JAVNA VATROGASANA POSTROJBA

GRADA ZAGREBA

Savska cesta 1/3, 10 000 Zagreb

OIB: 92366589656

Tvrtka ili naziv Ponuditelja:

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Adresa Ponuditelja:

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OIB Ponuditelja:

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Račun Ponuditelja (IBAN) i naziv banke:

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Adresa elektroničke pošte i kontakt broj telefona:

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Predmet nabave: Kasko osiguranje vatrogasnih vozila, CPV: 66514110-0

Način nabave: postupak jednostavne nabave – evidencijski broj 99/2025

Cijena ponude bez PDV-a u eurima:

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Iznos PDV-a u eurima:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Cijena ponude s PDV-om u eurima:

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Rok valjanosti ponude: 30 dana

M.P. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Potpis ovlaštene osobe ponuditelja)

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Mjesto i datum