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電郵/Email: contract@idq.org.mo

SERVICE REQUEST FORM						For IDQ use only SR No.: IDQ-2025SR						
IPED- Industrial Plant Engineering Department					Obra No.:							
Energy System Testing Services					Version: IDQ-Q-202501							
Client:					P.O. No.(If applicable):							
Address:	Address:					Tel:						
E-Mail:					Fax:							
Project name:					Cor	ntact person:						
Location:					Site contact person:							
Reference standard:   The Macau Administrative Regulation No. 20/2014  Other:												
Report Title∶ □Same as 「Client」 □ Report □ CHINESE Language: □ ENGLISH												
Price list item no.		Test items		Unit price		orice	Quant	Quantity		Amount		
1.2	Photo	Photovoltaic System Power Quality Test (per day)			\$12,500.00							
1.3	Testir	Testing Equipment Transportation Fee (per unit)			\$1,500.00							
1.4	Site \	Visit Charge (per half day)		\$1,000.00								
1.5	Attendance Fee (applicable to the case which attended to the scene but the conditions are not available to test)			\$2,000.00								
1.6	Addit	tional Charge: Overtime (1 person.hour)		\$500.00								
1.7	Additional Charge: Work on Saturaday, Sunday, Public Holiday or Government Holiday			50% of basic charge								
1.8	Additional Charge: Work on Labor Holiday			100% of basic charge								
1.9	Additional Charge: Report Urgent Processing (within 7 working days)				30% of basic charge							
1.10	Additional Charge: Report Re-issue (Original Report) (per copy)				\$500.00							
1.11	Addit	Additional Charge: Data change charge (per request)				\$1,000.00						
1.12	Addit	tional Charge: Booking cancel charge (per	r request)	\$1,000.00								
For IDQ us	se only	only			Discount :		%					
To IDQ use only						Total:	MOI	P				
Remark :			NOTE: ALL SERVICES ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE PRICE LIST AND REMARKS (1.2).									
For IDO us	AD contact person:			□Cannot provide			vide the	related	d service	a		
For IDQ use only  Contact person:  **Py cigning this SPE you are aware of and agree to comply with the conditions of s				Cannot provide the related service								
**By signing this SRF, you are aware of and agree to comply with the conditions of se List" and are bound by them.												
Client's acceptance:			Received by:	Арр	pproved by:			Confirmed by:				
Signature & company stamp:												
Date:			Date:	Date:			Date:					