

AMERICAN ACADEMY ALUMNI FOUNDATION

(A Corporation Limited by Guarantee and founded in 1973)

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Artificial grass application

I. Introduction

The American Academy Alumni Foundation (AAAF) owner of the American Academy Larnaca is looking to appoint a contractor:

- 1. To deliver and apply the requested materials and quantities as described on table "A".
- 2. To undertake all of the necessary works required for the preparation of the area (ground) intended for the artificial grass installation.
- 3. The successful tenderer should be able to complete all works by November 15 2023.

II. Procedures

The successful tenderer will be expected to:

- 1. To carry out <u>ALL</u> of the required works according to the health and safety regulations of the department of labor and inspection.
- 2. To provide <u>ALL</u> of the certificates (as may be required by Cyprus legislation) for the type/specifications/approval of service/product, requested in this tender.
- 3. <u>Prior the submission of any tender please call 24746364 for an appointment on-site.</u>
- 4. To complete <u>ALL</u> of the fields as outlined on the <u>TABLE "A"</u> at the tender submission page 3.

III. Placement of offers

- Tenders should be submitted in a sealed envelope by 12:00 a.m., on Monday 1st of October 2023 in the Tender Box at the AAL Treasury Office, (Graduates Centre Building, Markou Drakou street, and tel: 24746354).
- 2. Incomplete tenders will be excluded.
- 3. The AAAF is not obliged to accept the lowest or any tender.

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TENDER SUBMISSION PAGE 3

TABLE "A"

ITEM (SHORT DESCRIPTION)	QUANTITY	UNIT PRICE in euro (€)	TOTAL PRICE in euro (€)
ARTFICIAL GRASS APPLICATION - MINIMUM REQUIREMENTS/CHARACTERISTICS 1. Pile height: from 38mm to 40mm 2. Stich rate: ≥ 160/m 3. Density: ≥16,000/m² Please attach proposed material/s characteristics/specifications/licenses and supply product/s sample/warranty)	≈150m²		
ALL other costs (please outline, e.g. ground preparation works, other materials etc.)			
TOTAL			
VAT			
GRAND TOTAL			

Company Name:			
Authorized Person's Name:			
Signature:			
Date:			
Contact telephone/mobile no:	Email address:		