|  |  |
| --- | --- |
| Company |  |
| Date |  |
| Contact Name |  |
| Project Name |  |
| Project Overview |
|  |
| Quote request for (Please tick) |
| Collaborative R&D  |  |
| Routine testing and sample preparation  |  |
| Project Deliverables  |
|  |
| Project Budget & Time Scales |
|   |
| Equipment/ Materials (GEIC to order)  | Equipment/ Materials (Partner to Supply) |
|  |  |
| Key Project Dependencies (E.g Grant applications, Supplier) |
|  |
| Project Scope & Field of Use  |
|  |
| Desired Project Completion Date |
|  |
| Additional Items Required  |
|   |