**Managing Consultancy and Professional Services Framework 940  
Direct Award**

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| --- | --- |
| Contracting Authority Name |  |
| Contracting Authority Contact |  |
| Contracting Authority Email Address |  |
| Contacting Authority Phone Number |  |
| How would you like the provider to contact you in response to the direct award? |  |

**All direct awards will be in-line with the framework terms and conditions and the call off terms and conditions.**

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| **Project Requirements** |  |

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| **Direct Award Pricing** |  |

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| **Specification** |  |

**If you have any amends to the call-off terms and conditions, please state here:**

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