

Section IV: Contract Forms

eSourcing reference: ITB/2025/55990


UNOPS General Conditions of Contract

In the event of a Contract, the following General Conditions of Contract will apply:

- UNOPS General Conditions of Contract for the provision of Services

The conditions are available at: <http://www.unops.org/english/Opportunities/suppliers/how-we-procure/Pages/default.aspx>

Sample for One UNOPS Vendor Profile Form (For new vendor) for reference

 SUPPLIER REGISTRATION FORM											
SECTION 1: SUPPLIER INFORMATION											
Supplier/Vendor name, Company name, External individual name or Implementing Partner name (For individuals, please enter your first name, middle name and last name as per your national identification card or passport)					Company registration no. (For companies only)		Valid from (dd/mm/yyyy)		Valid to (dd/mm/yyyy)		
UNGM Number*					VAT registration no.						
Country					Date of birth (dd/mm/yyyy)		(For individuals only)				
Identity Document Type		<input type="checkbox"/> National ID <input type="checkbox"/> Passport			<input type="checkbox"/> Other, please specify:						
Identity document no.					Issue date (dd/mm/yyyy)		Expiry date (dd/mm/yyyy)				
Supplier Group (Select one of the below options)											
<input type="checkbox"/> Company (Private or Public)*		<input type="checkbox"/> University/educational institution			<input type="checkbox"/> UN Agency /Institution						
<input type="checkbox"/> External Individual		<input type="checkbox"/> IGO(Intergovernmental Organization)			<input type="checkbox"/> Government Agency						
<input type="checkbox"/> Financial institution (including insurance and banking)		<input type="checkbox"/> NGO(Nongovernmental Organization)									
* UNOPS requires Companies to register with the United Nations Global Marketplace on www.ungm.org (UN supplier database)											
SECTION 2: SUPPLIER CONTACT INFORMATION											
General/permanent street address											
City					Postal code (ZIP)						
State/province					Country						
Primary Supplier/Vendor focal point contact information					Secondary/alternate contact person						
Name				Title		Name				Title	
Telephone no.				Email		Telephone no.				Email	
SECTION 3: SUPPLIER BANKING INFORMATION (For additional bank accounts, please provide additional forms)											
Name of banking institution					Account Name (please indicate as shown on bankbook/bank account)						
IBAN no.					Bank account no.						
Clearing code/bank code (ACH/routing no/ IFSC/sort code)					SWIFT/BIC code						
Branch code					Bank account currency						

Branch name			Bank account type	<input type="checkbox"/> Checking <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Cheque <input type="checkbox"/> Other please specify	
Bank's street address					
City			Postal code (ZIP)		
State/province			Country		
Intermediary/correspondent bank, if applicable					
Name of intermediary bank			Intermediary IBAN no.		
Country of intermediary bank		SW IFT/ BIC code		Clearing code/bank code	
<p>Information provided on this registration form will be treated in accordance with UNOPS's EOD on Privacy and Information Security and its related data protection and data retention policies. Digital signatures are accepted only if they can be validated by UNOPS. Incomplete or erroneous information may prevent payment to your account. Any loss due to any error or irregularity in the information submitted by the Supplier/Vendor will be borne by the Supplier/Vendor.</p>					
Supplier/Supplier's Representative's Signature and Stamp			Date and Place		

		Bank detail change	UNGM Ineligibility Lists/Claims Log check	Supplier/Vendor have direct agreement/contract with UNOPS	Supplier/Vendor or paid via cash supplier?
	<input type="checkbox"/> New Supplier <input type="checkbox"/> Update existing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Requester (UN) (First name/last name/extension)		I hereby confirm that I have followed the Procurement Manual or the grant support policy (if applicable) and the information submitted is accurate.			
		Signature of Requester		Date	

UNOPS sample contract for Purchase Order for reference

The sample Contract for Professional Services template is included in this RFP by this reference and is attached as a separate PDF document.



Delivery:
United Nations Office Project Services
Denmark

Purchase Order

Order Number:
Status:
CoRegNo:
Supplier ID:
Order date:
Delivery date:
Delivery method:
Delivery term:
Payment terms:
Our ref:
Your ref:

No	Article	Description	Quantity	Unit	Unitprice	Currency	Amount
Total in GTG							

Acceptance of this Purchase Order shall effect a contract between the Parties, under which the rights and obligations of the Parties shall be governed solely by the conditions of this Purchase Order, including the General Conditions of the United Nations Office for Project Services (UNOPS) and any attachments, which in their entirety shall constitute the entire agreement between the Parties, superseding the contents of any other negotiations and/or agreements, whether oral or in writing, pertaining to the subject of this Purchase Order.

UNOPS General Conditions for Goods and UNOPS General Conditions for Contracts for Professional Services, as applicable, are available at <https://www.unops.org/english/Opportunities/Suppliers/Pages/default.aspx>.

In the event that any terms contained in the attachments are incompatible with the terms of the General Conditions, the latter shall prevail.

No derogation from the General Conditions shall be accepted unless otherwise expressly stated through the addition of Special Conditions in this Purchase Order.

Acknowledgement

UNOPS General Conditions for Goods and UNOPS General Conditions for Contracts for Professional Services, as applicable, are available at <https://www.unops.org/english/Opportunities/Suppliers/Pages/default.aspx>.

This Purchase Order is approved by
 Authorized signature

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