**United Nations Office for Project Services (“UNOPS”)**

**Ethiopia Multi-Country Office (ETMCO) – Ethiopia Office**

**Office**

**Section II**

**Returnable Bid Schedules**

**Rehabilitation of OSS Registration Model, Staff & Guest Toilets and Construction of Guard Post in Pungindo Nuer Refugee Camp, Pungindo Agnuak Refugee Camp, Kule Refugee Camp, Tierkidi Refugee Camp and Ngueyyiel Refugee Camp: Gambella Region, Ethiopia**

**Contract Type: Short Form Construction Contract**

**Contract No.: TBA**

**Submission Deadline: as indicated on eSourcing Procurement Portal**

**ITB Case No.: ITB/2021/25019**

**Addis Ababa, Ethiopia**

**SECTION II**

**RETURNABLE BID SCHEDULES**

**[Note to Bidders:** **Instructions to complete each Returnable Bid Schedule are highlighted in BLUE in each schedule. Please complete the Returnable Bid Schedules as instructed and return them as part of your bid by uploading them against their specific Document Checklist in the UNOPS eSourcing system**]

**Returnable Bid Schedule 1**

**Form of Bid**

**United Nations Office for Project Services**

**Ethiopia Operational Hub (ETOH), Ethiopia Office**

**UNECA Compound, Zambezi Building, 5th Floor, West Wing**

**P.O. Box: 60197**

**Addis Ababa**

**Ethiopia**

Dear Sir/Madam,

**Subject:Invitation to Bid for the Rehabilitation of OSS Registration Model, Staff & Guest Toilets and Construction of Guard Post in Pungindo Nuer Refugee Camp, Pungindo Agnuak Refugee Camp, Kule Refugee Camp, Tierkidi Refugee Camp and Ngueyyiel Refugee Camp: Gambella Region, Ethiopia (RE-BID). Case No. ITB/2021/25019, dated [Insert Date]**

1. We, [**Name of Bidder**], hereby submit a bid for the construction of the above-referenced works in response to the above-referenced ITB.
2. We warrant that in preparing and submitting this bid, we have complied with, and are willing to be bound by, any and all of the requirements and provisions of the above-referenced ITB, including the terms and conditions of the Contract as set out in Section III of the ITB.
3. Based on the above, our proposed Contract Price is: [**Insert Proposed Contract Price in numbers and letters**].
4. Our bid shall remain valid for UNOPS’ acceptance until 90 days from the Deadline for Bid Submission.
5. We acknowledge and agree that:
   * subject to Section I of the ITB, UNOPS is not bound to accept the lowest bid or any other bid it may receive in response to the above-referenced ITB;
   * no liability of UNOPS and no binding contract exists until the Contract is executed by both parties;
   * each party constituting the bidder is bound jointly and severally by this bid; and

I, the undersigned, certify that I am duly authorized by [**insert name of bidder**] to sign this bid and bind [**insert name of bidder**] should UNOPS accept this bid:

**Full Name:**

**Designation:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Signed:**       **Company Seal:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 2**

**FORM OF BID SECURITY**

**BANK GUARANTEE FOR BID**

**NOT USED**

**RETURNABLE BID SCHEDULE 3**

**BIDDER'S DETAILS**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

**Note:**

***Bidders/Contractors shall provide a brief statement (not more than 15 pages) showing their approach to demonstrate compliance with UNOPS requirements. The presentation format shall have the following contents:***

**QUALIFICATION OF BIDDER/CONTRACTOR**

**Brief Description of Bidder as an Entity:**

Provide a brief description of the Bidder/Contractor submitting the bid, its legal mandates/authorized business activities, the year and country of incorporation, types of activities undertaken, and approximate annual budget, reference to reputation . . .

***[insert bidder’s details here]***

**Bidder Information Summary Form**

| **No.** | **Description** | **Detail** |
| --- | --- | --- |
| **1** | **Bidder’s Legal Name** | [insert Bidder’s legal name here] |
| **2** | **Type of Business Formation:** | ☐ Sole Proprietorship  ☐ Partnership  ☐ Limited Labiality Company (Plc)  ☐ Share Company (Corporations)  ☐ Government Owned |
| **3** | **Country of Registration:** | [insert here] |
| **4** | **Business Registration ID:** | [insert here] |
| **5** | **UNGM Registration ID:** | [insert here] |
| **6** | **Year of Establishment:** | [insert here] |
| **7** | **Country/ies of Operation:** | [insert here] |
| **8** | **No. of Staff:** | [insert here] |
| **9** | **Latest Credit Rating *(if any):*** | [insert here] |
| **10** | **Contract Signatory in case of Award:** | **Full Name:** [insert here]  **Designation:** [insert here]  **Phone:** [insert here]  **Email:** [insert here] |
| **11** | **Legal Business Address:** | **Specific Address:** [insert here]  **Telephone:** [insert here]  **Email:** [insert here]  **Website:** [insert here]  **Skype:** [insert here]  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] |

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 4**

**[ BILL OF QUANTITIES]**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |

**Note to bidders:** Bidders shall submit within this Returnable Bid Schedule 4 (or annexed to it if files size is prohibitively large) fixed unit rates and prices for all items in the Bill of Quantities. Bidders shall provide rates and/or prices for all items listed in the Bill of Quantities. Where an item is not priced and/or a rate is not provided in the Bill of Quantities such price and/or rate shall be deemed to be allowed for and included in other rates or prices contained in the Bill of Quantities.

Bidders shall fill in this Price Schedule Form in accordance with the instructions indicated.

| **The Financial Proposal/Quotation Must be Submitted in:** | **ETB** |
| --- | --- |

**BID SUMMARY**

| **No.** | **Financial Proposal Cost Breakdown** | **Curr.** | **AMOUNT** |
| --- | --- | --- | --- |
| 1 | **Bill Nr.1 - Mobilization** | ETB |  |
| 2 | **Bill Nr.2 - Rehabilitation of Kule OSS Model** | ETB |  |
| 3 | **Bill Nr.3 - Rehabilitation of Ngueyyiel OSS Model** | ETB |  |
| 4 | **Bill Nr.4 - Rehabilitation of Tierkidi OSS Model** | ETB |  |
| 5 | **Bill Nr.5 - Rehabilitation of Pungindo Nuer OSS** | ETB |  |
| 6 | **Bill Nr.6 - Rehabilitation of Pungindo Agnuak OSS** | ETB |  |
| **GRAND TOTAL BEFORE VAT** | | **ETB** |  |
| **15% VAT** | |  |  |
| **GRAND TOTAL AFTER VAT** | | **ETB** |  |
| **Bill Nr.7- Day Works** | |  |  |

***NOTE:*** [***Upload duly signed Priced Bill of Quantity (BoQ) and pdf Form under the File Name “Returnable Bid Schedule 4 – Priced BoQ”***

I, the undersigned, certify that I am duly authorized by [**insert full name of bidder**] to sign this bid and bind [**insert full name of bidder**] should UNOPS accept this bid:

**Full Name:**

**Designation:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Signed:**       **Company Seal:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 5**

**BIDDER PRELIMINARY PROGRAMME**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

### Note to bidders: *Bidders shall submit a preliminary programme for the execution of the works.*

### *Bidders are required to make their own detailed assessment of the time, work methods and activities that shall be required for the successful and timely completion of the works, and shall submit their bid on the basis of an assurance that the works can be completed by the Time for Completion and the milestone dates identified in the Contract.*

### *The preliminary programme shall be prepared in sufficient detail to enable UNOPS to adequately evaluate the planned execution, staging and allocation of resources for the works.*

### *The preliminary programme shall show the dates when the milestones identified in the Contract shall be achieved. It shall also include and/or be accompanied by:*

#### *a programme narrative that describes the mechanisms and assumptions made in preparing the programme;*

#### *a critical path analysis for the execution of the works which shall clearly show the float times available within the programme and the earliest start/earliest finish and latest start/latest finish times for each and every activity; and*

#### *The Preliminary Programme may be prepared in MS Excel or MS Project. The Outline Statement of Proposed methods demonstrates the Bidder’s capacity to identify the core or sensitive components required to complete the works within the required quality expectations and indicated the approach that the Bidder intends to use in order to execute those components.*

### If a bidder is selected as the preferred bidder, it shall be required to further develop and complete this programme in accordance with the contract for works.

*[insert the detail programme and task schedules using MS Excel or MS Project here or* ***MUST BE******ANNEXED******if too large****]*

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 6**

**PROPOSED PROJECT TEAM AND ORGANIZATIONAL STRUCTURE**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

**Note to bidders:** *Bidders shall set out below:*

1. *the key personnel that the bidder proposes to assign to the execution of the works;*
2. *the qualifications and relevant experience of each of the key personnel that the bidder proposes to assign to the execution of the works,* ***including a CV/resume and Academic Credential for each of the key personnel****;*
3. *the proposed* ***organisational structure*** *for carrying out the works. Bidders are to attach a chart indicating the bidder's organisation structure; and*
4. *the bidder’s representatives who are authorized to sign the Contract. The bidder shall provide a copy of such authorization*

**Key Personnel**

The multi-disciplinary team should comprise members with the following educational qualifications; experience and competencies:

| **No.** | **Position Description** | **No. of persons** | **Name** | **Years of Relevant Experience** |
| --- | --- | --- | --- | --- |
| 1 | **Project Manager:**  **Minimum Educational Qualification:**   * A **Bachelor’s** degree in Civil Engineering, Construction Management or Project Management.   **Work Experience**   * **At least 5 years** of experience, related to the project requirements, in civil engineering, construction management, construction project supervision is required. * **At least 1 year** of experience in project management and supervision in areas outside of Addis Ababa is an asset.   **Language Requirements:**   * Fluency in written and oral English is required * Knowledge of local language is an asset | **1** | **[Insert Name]** | **[Insert Year ]** |
| 2 | **Site Engineer:**  **Minimum Educational Qualification:**   * A Bachelor's Degree in Civil Engineering or Construction Management. * A combination of Diploma Certificate with additional 2 years of relevant work experience (6 years in total) may be accepted in lieu of the education requirements outlined above.   **Work Experience:**   * **At least 4 years** of experience, related to the project requirements, in civil engineering, construction management, construction project supervision is required. * **At least 1 year** of experience in project management and supervision in areas outside of Addis Ababa is an asset.   **Language Requirements:**   * Fluency in written and oral English is required * Knowledge of local language is an asset | **1** | **1. [Insert Name]** | **[Insert Year ]**  **[** |
| 3 | **Sanitary Engineer:**  **Minimum Educational Qualification:**   * **Bachelor's Degree** in Civil or sanitary or mechanical Engineering from an accredited university or equivalent. * A combination of Diploma Certificate with additional 2 years of relevant work experience (7 years in total) may be accepted in lieu of the education requirements outlined above.   **Work Experience:**   * **At least 5 years** of progressively responsible experience in plumbing works and sanitary fixture installation   **Language Requirements:**   * Fluency in written and oral English is required * Knowledge of local language is an asset | **1** | **[Insert Name]** | **[Insert Year]** |
| 4 | **Electrical Engineer:**  **Minimum Educational Qualification:**   * **A** **Bachelor's Degree** in Electrical Engineering from an accredited university or equivalent. * A combination of Diploma Certificate with additional 2 years of relevant work experience (7 years in total) may be accepted in lieu of the education requirements outlined above.   **Work Experience:**   * **At least 5 years** of progressively responsible experience in electrical engineering with strong knowledge of design, installation, operation and monitoring of electrical power supply and distribution systems. Photovoltaic System (Solar Energy), is preferred   **Language Requirements:**   * Fluency in written and oral English is required * Knowledge of local language is an asset | **1** | **1. [Insert Name]** | **[Insert Year ]** |
| 5 | **Lead General Foreman:**  The Contractor shall provide CVs of the General Foreman to be deployed on site for construction:  Site Foreman with **a minimum of 6 years of experience** | **5** | 1. **[Insert Name]** 2. **[Insert Name]** 3. **[Insert Name]** 4. **[Insert Name]** 5. **[Insert Name]** |  |

**Contractor's Representative and its Witness in case of Contract Award:**

| **No.** | **Position Description** | **Name** | **Years Exp** |
| --- | --- | --- | --- |
| 1 | **Contractor’s Representative** | **Full Name:** [insert here]  **Designation:** [insert here]  **Phone:** [insert here]  **Email:** [insert here] | **[Insert No]** |

**INSTRUCTION:**

[For each of the names identified above, attach his/her CV using the format on the following page: Format for Resume of Proposed Key Personnel]

[*Stamp form of bid with official stamp of the bidder*]

**Format for Resume of Proposed Key Personnel**

| **Name:** | [insert here] | |
| --- | --- | --- |
| **Position for this Contract:** | [insert here] | |
| **Nationality:** | [insert here] | |
| **Email:** | [insert here] | |
| **Area of Specialization:** | [insert here] | |
| **Years of Relevant Experience:** | [insert here] | |
| **Countries of Work Experience:** | [insert here] | |
| **Language Proficiency:** | [insert here] | |
| **Educational and other Qualifications:** | [insert here] | |
| **Professional certifications:** | [Provide details of professional certifications relevant to the scope of services]   * Name of institution: [insert here] * Date of certification: [insert here] | |
| **Summary of Experience:** Highlight experience in the region and on similar projects. | | |
| **Employment Record/ Experience (From most recent):** [Starting with present position, list in reverse order, every employment held. List all positions held by personnel since graduation, giving dates, names of employing organization, title of position held and location of employment. For experience in last five years, detail the type of activities performed, degree of responsibilities, location of assignments and any other information or professional experience considered pertinent for this assignment.] | | |
| **Period: From – To** | **Name of activity/ Project/ funding organisation, if applicable:** | **Job Title and Activities undertaken/Description of actual role performed:** |
| e.g. June 2004-January 2005 |  |  |
| etc. |  |  |
| **References no.1 (*minimum of 3*):** | **Name:** [insert here]  **Designation:** [insert here]  **Organization:** [insert here]  **CONTACT INFORMATION**  **Phone:** [insert here]  **Email:** [insert here]  **City:** [insert here]  **Country:** [insert here] | |
| **Reference no.2** | **Name:** [insert here]  **Designation:** [insert here]  **Organization:** [insert here]  **CONTACT INFORMATION**  **Phone:** [insert here]  **Email:** [insert here]  **City:** [insert here]  **Country:** [insert here] | |
| **Reference no.3** | **Name:** [insert here]  **Designation:** [insert here]  **Organization:** [insert here]  **CONTACT INFORMATION**  **Phone:** [insert here]  **Email:** [insert here]  **City:** [insert here]  **Country:** [insert here] | |

***Annexures:*** *Bidders are strongly advised to attach detail CV, Academic Credentials and work experience supporting documents for the proposed Key Personnel*

Declaration:

I, the undersigned, certify to the best of my knowledge and belief, this bio-date is accurate.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Personnel (individual) or firm representative**  **Date Signed**

**RETURNABLE BID SCHEDULE 7**

**INSURANCES**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

**Note to bidders:** *Bidders are to provide details of their insurance policies if they have any at the time of preparing their Bid. If selected, Bidders will have to comply with the insurance requirements as set out under* ***Article 14 and the Schedule of Details*** *of the Contract. Bidders are advised that UNOPS may request copies of the insurance policies and any endorsements during the review of bids, including amounts of any deductibles and all exclusions.*

We understand that UNOPS accepts insurance cover only from UNOPS approved insurance companies.

We propose the [[***Insert Name of Insurance Provider*] *Contractors All Risks (CAR) Insurance and Workers Compensation Insurance (WCI) Provider*** as our provider for the CAR and WCI insurance cover, which shall include Public Liability and Employers Liability, in accordance with the provisions of the UNOPS Short Form Contract in Section III.

**Full Name:**

**Designation:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Signed:**       **Company Seal:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 8**

**CAPACITY, EXPERIENCE, WORK IN HAND AND WORK COMPLETED**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

1. **Bidder’s Experience and Financial Capacity**

The prospective Contractor/Bidder is expected to meet the following minimum organizational requirements:

* Bidder Should submit renewed Business License for **2021 GC (2013 EC)** and Tax Registration/VAT Certificate(s);
* Bidder must be registered in Federal Republic of Ethiopia by authorized Government Entity to be engaged in Construction Works
* Bidder should be **GC/BC FROM GRADE ONE to SIX CATEGORY** certified by Construction Minister, Construction Companies **Certificate of Competence (CoC)** that clearly indicate the LEVEL;
* Bidder has a minimum of **five (5)** of practical experience in construction and satisfactorily completed at least **three (3)** equivalent construction projects in the last **three (3) years**.
* The Bidder shall demonstrate through past projects its ability to complete high quality works and attach **at least three (3) letters** **of reference** **and/or Completion** Certificates from previous employers; preferably from clients such as UN Agencies, International NGOs, Multinational companies, etc.;
* It should demonstrate its capabilities and understanding of the Scope of Works (SOWs), Bill of Quantities (BoQ) and Drawings in its technical proposal;
* It should provide a brief description of its financial standing; and clearly demonstrate its financial strength as well as its financial plan (if any) to successfully complete the construction project within the contract timeline;
* **Multiple award criteria** : A maximum of two contracts will be awarded to one vendor under the project 22635 - Assessment Rehabilitation of One Stop Shop Centers.
* **Financial Liquidity:** Current Ratio (Current Asset / Current Liability) **MUST be at least 1.00;**
* **Financial capability – Sales Turnover:** Bidders should have average annual sales turnover of minimum **ETB 15 Million** in the last **two (2) years**; and
* Prospect Contractor/Bidder must demonstrate financial capacity through provision of the past **TWO RECENT AUDITED FINANCIAL STATEMENTS (2019 GC and 2020 GC / 2011 EC and 2012 EC) or latest statement**

1. **Similar Projects during the last** **Five (5) years:**

| **No** | **Brief Description of the Works** | **Country/Location** | **Value of the Contract in ETB** | **Contract Identification and Title and**  **Contact details of Client (Mandatory)**  **(Name, Address, telephone, email, fax)** | **Year project was undertaken** |
| --- | --- | --- | --- | --- | --- |
| 1 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 2 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 3 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 4 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 5 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 6 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 8 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |

***Note: Attach duly signed “Statement of Satisfactory Performance” from the Top Three (3) Clients in terms of Contract Value the past Five (5) years preferably from UN organizations, international organization and/or NGOs***

***Note: Please be sure the focal persons’ email addresses are* CORRECT, ACTIVE AND ARE WILLING TO REPLY *for formal reference request from UNOPS***

1. **All projects during the last three (3) years:**

| **No** | **Brief Description of the Works** | **Country/Location** | **Value of the Contract in ETB** | **Contract Identification and Title and**  **Contact details of Client (Mandatory)**  **(Name, Address, telephone, email, fax)** | **Year project was undertaken** |
| --- | --- | --- | --- | --- | --- |
| 1 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 2 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 3 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 4 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 5 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 6 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |
| 8 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert here] |

1. **All current projects underway or committed to start:**

| **No** | **Brief Description of the Works** | **Country/Location** | **Value of the Contract in ETB** | **Contract Identification and Title and**  **Contact details of Client (Mandatory)**  **(Name, Address, telephone, email, fax)** | **Year project was undertaken and % of Completion** |
| --- | --- | --- | --- | --- | --- |
| 1 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |
| 2 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |
| 3 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |
| 4 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |
| 5 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |
| 6 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |
| 8 | [insert here] | [insert here] | [insert here] | **Name:** [insert here]  **Designation:** [insert Position here]  **Organization:** [insert Name here]  **Telephone:** [insert here]  **Fax (if any):** [insert here]  **Email:** [insert here]  **BUSINESS ADDRESS:**  **County/Province:** [insert here]  **District:** [insert here]  **P.O. Box/ZIP:** [insert here]  **City:** [insert here]  **Country:** [insert here] | [insert Year]  [insert % of completion] |

***[insert details here how both managerially and financially will the bidder manage this project while the above list of current projects are underway in case of award]***

1. **Assets**

[**List information regarding relevant facilities, fixed and/or mobile plants and equipment that would be used on this project. If such facilities, fixed and/or mobile plants and equipment are not owned by the bidder, please include information on how facilities, fixed and/or mobile plants and equipment will be hired or leased.**]

**Essential assets subject to evaluation**

A Bidder must avail at least the following equipment and/or assets in order to successfully carry out the construction project in the specified sites. **Certificates of Ownership; Purchase Receipt and/or Equipment Lease/Hire Agreement** for all the list of assets/machineries shall be attached along with the “**ITB Returnable Bidding Document**”

**Note:** ***Click*** *on the respective Check Box of your choice.*

| **No.** | **Assets/Machineries** |  | **Remarks if any** | |
| --- | --- | --- | --- | --- |
| 1 | Concrete mixer (350 litre) | 3 | ***Certificates of ownership, Purchase Receipt or Equipment Lease/Rent Agreement need to be attached when submitting*** |
| 2 | Dump trucks: 10- 14m3 capacity | 1 | ***“ “ “*** |
| 3 | 4 WD Pickup (5 seats) | 1 | ***“ “ “*** |
| 4 | Plate compactor  Minimum plate size of 400mm x 400mm and weight min 50 Kg. | 2 | ***“ “ “*** |
| 5 | Concrete vibrator  Hose size of 80mm - 100mm | 5 | ***“ “ “*** |
| 6 | 2000 ltr Water Tanker | 5 | ***“ “ “*** |
| 7 | Diesel Generator Minimum size of 10 KVA. | 1 | ***“ “ “*** |

***NOTE:*** [***Upload duly signed Proposed Essential Construction Equipment/Machineries Excel Sheet and pdf Form .***

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 9**

**WORKS MANAGEMENT SYSTEM**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

**Note to bidders: Bidders are required to provide the following information:**

**Project Implementation/Quality Management**

* *Project implementation/quality management manual/policy (if any);*
* *An outline project implementation/quality management plan for the project.*

***[insert detail here]***

**Health and Safety (H&S) Management**

* *Health and safety management* manual/*policy (if any);*
* *An outline health and safety management plan for the project.*

***[insert detail here]***

**Environmental Management**

* *Environmental management manual/policy(if any);*
* *An outline environmental management plan for the project.*

***[insert detail here]***

***NOTE:******After selection of the successful bidder, UNOPS, in consultation with the bidder, will review the above information with a view to determining how it can be integrated with UNOPS’ own works management system. Please note that UNOPS’ management system sets a standard minimum and shall apply by default.***

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 10**

**PROPOSED SUBCONTRACTORS AND SUPPLIERS**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

***Note to bidders****: Bidders shall provide details of the subcontractors and suppliers they propose to use on the project, including:*

* *Companies' names; and*
* *Particulars of the works which the bidder proposes to be undertaken by them.*

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 11**

**PROPOSED SOURCES OF NATURALLY OCCURRING MATERIALS**

**AND**

**OUTLINE STATEMENT OF PROPOSED METHODS**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

***Note to Bidders:*** *Bidders shall provide details of their proposed sources of naturally occurring materials, including* ***aggregates, and outline statement method statement*** *setting out how they intend to stage and construct the works and coordinate with the* ***local authorities*** *in order to obtain all required authorizations and make sure that the project will be implemented on schedule.*

*Bidder shall clearly elaborate the implementing* ***sequence of major component of works from mobilization to the handover of the site, resource*** *(material, labor and machinery) utilization plan in order to meet the project timeline and the proposed materials/plants to be incorporated in the Permanent Works shall meet the minimum requirements of the specifications.*

*.*

*[insert the detail here]*

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 12**

**DECLARATION**

**United Nations Office for Project Services**

**Ethiopia Operational Hub (ETOH), Ethiopia Office**

**UNECA Compound, Zambezi Building, 5th Floor, West Wing**

**P.O. Box: 60197**

**Addis Ababa**

**Ethiopia**

Dear Sir/Madam,

**Subject** **Invitation to Bid for the Rehabilitation of OSS Registration Model, Staff & Guest Toilets and Construction of Guard Post in Pungindo Nuer Refugee Camp, Pungindo Agnuak Refugee Camp, Kule Refugee Camp, Tierkidi Refugee Camp and Ngueyyiel Refugee Camp: Gambella Region, Ethiopia(RE-BID). Case No. ITB/2021/25019, dated [Insert Date]**

I, [**insert name and title**], [**insert title**], do solemnly and sincerely declare that:

1. I am duly authorised by [**Insert name of bidder**] (the Bidder)to make this declaration on its behalf.
2. I make this declaration on behalf of the Bidder.
3. Before the Bidder submitted its bid, neither the Bidder, nor any of its employees or agents, had knowledge of the bid price proposed by any other bidder who submitted, or of any person, company, other body corporate or firm that proposed to submit, a bid in response to this ITB.
4. Before the Deadline for Bid Submission of this bid process, neither the Bidder, nor any of its employees or agents, disclosed the Bidder’s bid price to:
   1. any other bidder who submitted a bid in response to this ITB;
   2. any person, company, other body corporate or firm proposing to submit a bid in response to this ITB.
5. Neither the Bidder, nor any of its employees or agents, has provided information to:

###### any other bidder who has submitted a bid in response to this ITB;

###### any person, company, other body corporate or firm proposing to submit a bid in response to this ITB; or

###### any other person, company, body corporate or firm for the purpose of assisting in the preparation of a bid in response to this ITB.

1. The Bidder is genuinely competing for the Contract.
2. Neither the Bidder, nor any of its employees or agents, has entered into any contract, agreement, arrangement or understanding, other than as disclosed to UNOPS in the bid, that the successful bidder for the Contract shall pay any money to, or provide any other benefit or other financial advantage to, an industry association in respect of the Contract.
3. Neither the Bidder, nor any of its employees or agents, has entered into any contract, agreement, arrangement or understanding that the successful bidder for the Contract shall pay any money to, or provide any other benefit or other financial advantage to, any other bidder who unsuccessfully tendered for the Contract.
4. Neither the Bidder, nor any of its employees or agents, has entered into any contract, agreement, arrangement or understanding that bidders for the Contract would include an identical or similar condition or qualification in their bids.

I acknowledge that this declaration is true and correct, and I make it in the belief that a person making a false declaration is liable to penalties.

| **DECLARED** at [**insert place**] on [**insert date**] before me:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of authorised witness  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of authorised witness  (capital letters)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address of authorised witness  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Witness’ Occupation  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of declarant |
| --- |

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 13**

**CONFLICTS OF INTEREST**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

#### *Note to Bidders: Bidder shall declare any actual or potential conflicts of interest which may arise with respect to the project as between:*

#### *UNOPS and the bidder; and*

#### *UNOPS and any subcontractor (including consultants) proposed by the bidder*

*[insert the declaration detail here]*

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 14**

**DISPUTE DETAILS**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

***Note to Bidders:*** *Bidder shall* ***submit a statement below providing*** *details of any current contract dispute and/or arbitral or legal proceeding involving the bidder. The statement shall include details of any dispute which has been, or is reasonably likely to be, referred to formal dispute proceedings (e.g. mediation or arbitration) or is the subject of litigation in any court locally or overseas. This information shall be provided regardless of whether such action has been instigated by the bidder against a client or a client of the bidder against the bidder.*

*[insert the dispute detail if any here, if there is no declare it so]*

[*Stamp form of bid with official stamp of the bidder*]

**RETURNABLE BID SCHEDULE 15**

**ADDENDA TO ITB**

| **ITB Case No.:** | **ITB/2021/25019** |
| --- | --- |
| **Name of Bidder:** | [insert here] |
| **Date:** | [insert here] |
| **Signature:** | [sign here] |

We acknowledge receipt of the following Addenda (*if any provided with this tender*), which have been taken into account in preparing the bid:

| **Addendum Number** | **Dated** |
| --- | --- |
|  |  |
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**Note:** *If Addendum is provided once this ITB is posted. If there is no, insert Not Applicable (N/a)*

[*Stamp form of bid with official stamp of the bidder*]