**Section III: Returnable Bidding Forms**

**eSourcing reference:** RFQ/2021/25131

Note to Bidders: The following returnable forms are part of this RFQ and must be completed and returned by bidders as part of their Bid. Instructions to complete each Form are highlighted in blue in each Form. Please complete the Returnable Biding Forms as instructed and return them as part of your bid by uploading them against their specific Document Checklist in the UNOPS eSourcing system.

This Section comprises the following Returnable Bidding Forms:

* Form A: Joint Venture Partner Information Form
* Form B: Bid Submission Form
* Form C: Price Schedule Form
* Form D: Technical Bid Form
* Form E:Bidder Information Form
* Form F: Manufacturer’s Authorization
* Form G: Performance Statement Form

**Form A: Joint Venture Partner Information Form**

The Bidder shall fill in this Form in accordance with the instructions indicated below.

RFQ reference no: [insert RFQ reference No.]

Name of Bidder: [insert name of bidder]

Date: [insert submission date]

To be completed and returned with your Bid if the Bid is submitted as a Joint Venture/Consortium/Association.

| **JV / Consortium/ Association Information** | |
| --- | --- |
| **Name** | [complete] |
| **Names of each partner and contact information**  (address, telephone numbers, fax numbers, e-mail address) | [complete] |
| **Name of leading** partner (with authority to bind the JV, Consortium, Association during the Bidding process and, in the event a Contract is awarded, during contract execution) | [complete] |
| **Proposed proportion of responsibilities between partners (in %) with indication of the type of the goods/services to be delivered by each** | [complete] |

**Signatures of all partners of the JV:**

We hereby confirm that if the contract is awarded, all parties of the Joint Venture/Consortium/Association shall be jointly and severally liable to UNOPS for the fulfillment of the provisions of the Contract.

Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Form B: Bid Submission Form**

Bidders are requested to complete this form, sign it and return it as part of their bid submission. The bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

Date: [Insert submission date]

**Subject: Bid for the supply of** [***Insert a brief description of goods/services*]****in**[***Name of country/city*],** RFQ Case No. **[Insert RFQ ref number],** dated **[insert date]**

We, the undersigned, declare that:

* 1. We have examined and have no reservations to the bidding documents, including amendments No.: [Insert the number and issuing date of each amendment];
  2. We offer to supply in conformity with the bidding documents, including the UNOPS General Conditions of Contract, and in accordance with the delivery schedules specified in the Schedule of Requirements
  3. The total price of our bid, excluding any discounts offered in item (d) below, is: [Insert the total bid price in words and figures, indicating the various amounts and the respective currencies];
  4. The discounts offered and the methodology for their application are:
* **Discounts**: If our bid is accepted, the following discounts shall apply. [Specify in detail each discount offered and the specific item of the Schedule of Requirements to which it applies, including if applicable discounts for accelerated payment.]
* **Methodology of application of the discounts**: The discounts shall be applied using the following method: [Specify in detail the method that shall be used to apply the discounts];
  1. Our bid shall be valid for the period of time of 90 days from the date fixed for the bid submission deadline as set out in the RFQ, and it shall remain binding upon us and may be accepted at any time before the expiration of that period;
  2. If our bid is accepted, and if so requested in the Tender Particulars section, we commit to obtain a performance security in accordance with Instructions to Bidders Article 34 and the General Conditions of Contract;
  3. We have no conflict of interest in any activity that would put it, if selected for this assignment, in a conflict of interest with UNOPS;
  4. We have not declared bankruptcy, are not involved in bankruptcy or receivership proceedings, and there is no judgment or pending legal action against them that could impair their operations in the foreseeable future;
  5. Our firm confirms that the Bidder and sub-contractors have not been associated, or had been involved in any way, directly or indirectly, with the preparation of the design, terms of references and/or other documents used as a part of this solicitation;
  6. We embrace the principles of the United Nations Supplier Code of Conduct and adhere to the principles of the United Nations Global Compact;
  7. Our firm, its affiliates or subsidiaries – including any subcontractors or suppliers for any part of the contract – has not been declared ineligible by UNOPS, nor is included in the suspended/ineligibility list of the UN/PD, other UN Agencies, the UN Security Council, and the World Bank, in accordance with Instructions to Bidders Article 4, Eligibility;
  8. We have not offered and will not offer fees, gifts and/or favours of kind in exchange for this ITB and will not engage in any such activity during the performance of any contract awarded;
  9. We understand that you are not bound to accept the lowest evaluated bid or any other bid that you may receive.

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:

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

**Form C: Price Schedule Form**

RFQ reference no: [insert RFQ reference No.]

Name of Bidder: [insert name of bidder]

Bidders shall fill in these Price Schedule Forms in accordance with the instructions indicated.

**Bid Summary**

| 1. **Total Price of Goods (DAP)-Maiduguri** | [insert amount and currency] |
| --- | --- |
| 1. **Total Price of Goods (DAP)-Biu** | [insert amount and currency] |
| 1. **Total Price of Related Services (Training, Installation, etc.)** | [insert amount and currency] |
| **Bidder’s Total prices (1 + 2+3 )** |  |
|  |  |

**Prices for Goods**

| **Item/ lot** | **Description** | **Qty**  **(a)** | **Currency (USD)** | |
| --- | --- | --- | --- | --- |
| **Unit price DAP(b)** | **Total price DAP (a)x(b)** |
| 1. | PSA oxygen generator with filling station | 2 |  |  |
| 2. | Rotary Screw Air Compressor with Integrated Refrigerated Air Dryer | 2 |  |  |
| 3. | Air Receiver 120 Gallon with Pressure Relief Valve Assembly and Electronic Tank Drain | 2 |  |  |
| 4. | Oxygen Receiver 120 Gallon with Oxygen Line Regulator, Pressure Relief Valve Assembly, Bacteria Filter and Auto Shutdown Solenoid Valve | 2 |  |  |
| 5. | Oxygen Compressor | 2 |  |  |
| 6. | 10 Valve High Pressure Oxygen Cylinder Filling Manifold with 20 BSP and 2 pin index Pigtails and Steel Cylinder Rack with Safety Chains | 2 |  |  |
| 7. | Cylinder Evacuation Vacuum Pump w/ 4 Valves & BSP Adaptors | 2 |  |  |
| 8. | Digital Flow Meter Assembly | 2 |  |  |
| 9. | Interconnecting Piping & Electrical with Main Electrical Breaker Panel | 2 |  |  |
| **Total Price of Goods** | | | |  |
| **DAP to Maiduguri** | | | |  |
| **DAP to Biu** | | | |  |
|  | | | |  |

**Prices for related services**

| **Item/ lot** | **Description of the services** | **Quantity and physical unit (a) if applicable** | **Unit price**  **(b) if applicable** | **Total price per service**  **(a)x(b)** |
| --- | --- | --- | --- | --- |
| 1. | Training services |  |  |  |
| 2. | Installation (Maiduguri) |  |  |  |
| 3. | Installation (Biu) |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| **Total Price of Related Services** | | | |  |

NB: Bidder should indicate/attach the breakdown of cost for training,Installation and other related services.

**Bidder’s delivery data**

| **Country of origin of offered products** | Item 1 |  | | | |
| --- | --- | --- | --- | --- | --- |
| Item 2 |  | | | |
| Item 3 |  | | | |
| Item 4 |  | | | |
| Item 5 |  | | | |
| Item 6 |  | | | |
| Item 7 |  | | | |
| Item 8 |  | | | |
| Item 9 |  | | | |
| **DAP point(s) of delivery for offered products** | Item 1 |  | | | |
| Item 2 |  | | | |
| Item 3 |  | | | |
| Item 4 |  | | | |
| Item 5 |  | | | |
| Item 6 |  | | | |
| Item 7 |  | | | |
| Item 8 |  | | | |
| Item 9 |  | | | |
| **Shipment dimensions of offered products (Including package)** |  | **Gross weight** | **Total volume** | **Containers (if applicable)** | |
| **Number** | **Size** |
| Item 1 |  |  |  |  |
| Item 2 |  |  |  |  |
| Item 3 |  |  |  |  |
| Item 4 |  |  |  |  |
| Item 5 |  |  |  |  |
| Item 6 |  |  |  |  |
| Item 7 |  |  |  |  |
| Item 8 |  |  |  |  |
| Item 9 |  |  |  |  |
| Total |  |  |  |  |

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:

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Form D: Technical Bid Form**

RFQ reference no: [insert RFQ reference No.]

Name of Bidder: [insert name of bidder]

Bidders are required to complete the **Comparative Data Tables** included in Section II: Schedule of Requirements to demonstrate compliance with UNOPS requirements and insert them below. Bidders are NOT allowed to make any change in the “UNOPS requirements” columns of the Comparative Data Tables. Such changes might disqualify your bid.

**Technical specifications for Goods – Comparative Data Table**

| **Item No** | **UNOPS minimum technical requirements** | **Quantity** | **Is quotation compliant?** Bidder to complete | **Details of goods offered.** Bidder to complete |
| --- | --- | --- | --- | --- |
|  | **SYSTEM DESCRIPTION:** |  | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/model offered if applicable |
|  | PSA Oxygen Generator | 2 |  |  |
|  | Rotary Screw Air Compressor with Integrated Refrigerated Air Dryer | 2 |  |  |
|  | Air Receiver 120 Gallon with Pressure Relief Valve Assembly and Electronic Tank Drain | *2* |  |  |
|  | Oxygen Receiver 120 Gallon with Oxygen Line Regulator, Pressure Relief Valve Assembly, Bacteria Filter and Auto Shutdown Solenoid Valve | *2* |  |  |
|  | Interconnecting Piping & Electrical with Main Electrical Breaker Panel |  |  |  |
|  | Oxygen Compressor | *2* |  |  |
|  | 10 Valve High Pressure Oxygen Cylinder Filling Manifold with 20 BSP and 2 pin index Pigtails and Steel Cylinder Rack with Safety Chains | *2* |  |  |
|  | Cylinder Evacuation Vacuum Pump w/ 4 Valves & BSP Adaptors | *2* |  |  |
|  | Digital Flow Meter Assembly. | *2* |  |  |
|  | This plant will be manufactured and tested to the climatic conditions of the site in Nigeria. |  |  |  |
|  | **MINIMUM BID SUBMISSION REQUIREMENTS** |  |  |  |
|  | **PSA OXYGEN GENERATOR SPECIFICATIONS** |  |  |  |
|  | Touch Screen Control Panel with Integrated Oxygen Monitor, Audible Low Purity Alarm. Includes Air Filtration Package consisting of Particulate Pre-Filter, Coalescing Filter 0.01 micron & Carbon Adsorption Filter. |  |  |  |
|  | Product flow rate (Total): < 1100 SCFH, (26.29 - 34.18 Nm3/hr or 471 - 613 LPM) |  |  |  |
|  | Product O2 delivery pressure: < 2100 PSIG |  |  |  |
|  | Product Purity: USP 93% |  |  |  |
|  | Cylinder filling capacity: < 120 per 24hrs. |  |  |  |
|  | Oxygen Receiver characteristics: Total capacity < 220 gallons, with Oxygen Line Regulator, Pressure Relief Valve Assembly, Bacteria Filter and Auto Shutdown Solenoid Valve |  |  |  |
|  | Average Power Consumption: 2.2 kWh ± (5%) per Nm3 of product O2 at 151 Bar |  |  |  |
|  | **AIR COMPRESSOR SPECIFICATIONS.** |  |  |  |
|  | Air Compressor included for elevation: 5899 ft, 80 deg F & 80RH. |  |  |  |
|  | Ready-to-run, fully automatic, super silenced vibration damped, all panels powder coated. Suitable for use in ambient temperatures up to +45°C |  |  |  |
|  | User Interface: Touch screen, PC architecture, offers the capability of Dual, Quadro, Vario and continuous control. |  |  |  |
|  | User interface automatically controls and monitors the compressor package. The interface enables exchange of data and operational parameters allowing air manager. |  |  |  |
|  | Interfaces should be provided as standard for connection of modem or printer, a second compressor in base-load sequencing mode and for connection to data networks |  |  |  |
|  | Drive: 1:1 direct drive, high flex coupling without gearing. |  |  |  |
|  | Rotary screw compressor or equivalent. |  |  |  |
|  | Integrated refrigerated air dryer (*This may be provided as a standalone item*) |  |  |  |
|  | Maximum working pressure: 7.5-13 bar |  |  |  |
|  | Power: 30-50Kw, 3 phase, 380v/ 50Hz |  |  |  |
|  | Sound level: 65-70 db(a) |  |  |  |
|  | Sound insulated. |  |  |  |
|  | Cooling: Fluid and air flow cooling. |  |  |  |
|  | In built oil separation system. |  |  |  |
|  | Total Air receiver capacity: < 220 gallons, with pressure relief valve and electronic tank drain |  |  |  |
|  | **OXYGEN CYLINDER FILLING COMPRESSOR SPECIFICATIONS** |  |  |  |
|  | Maximum discharge Pressure: <2500 PSIG |  |  |  |
|  | Cooling: Air |  |  |  |
|  | Number of stages: 1 to 3 |  |  |  |
|  | Maximum RPM: 400-900rpm |  |  |  |
|  | Lubrication Type: Oil Free |  |  |  |
|  | Safety Control: High Pressure safety shut down. |  |  |  |
|  | **ELECTRICAL POWER REQUIREMENTS** |  |  |  |
|  | PSA Unit: Approximately 2 x 0.6 kW (220V / 50 Hz / 1 phase) |  |  |  |
|  | Feed air Compressor: Approximately 2 x 30 kW (380V / 50 Hz /3 phase) |  |  |  |
|  | Feed air refrigerated dryer: Included with Air Compressor, If standalone: Approximately 2x1.7 kW (220V/50Hz/1 phase) |  |  |  |
|  | Oxygen Compressor: Approximately 2 x 7.5 kW (380V / 50 Hz / 3 phase) |  |  |  |
|  | **CERTIFICATION & STANDARDS OF CONSTRUCTION** |  |  |  |
|  | ISO 9001:2008, ISO 14001:2004, ISO 12500, ISO 8573 |  |  |  |
|  | STANDARDS: NEMA, ASTM, ASME |  |  |  |
|  | CE APPROVED |  |  |  |
|  | **SYSTEM FEATURES** |  |  |  |
|  | Complete turnkey system, with automatic stop/start. Energy efficient process design. |  |  |  |
|  | Reliable, accurate, continuous online oxygen purity monitor with alarm. Auto system shutdown if the monitored oxygen purity falls below preset limits. |  |  |  |
|  | Easy to operate and maintain. With proper maintenance, the unit should provide over 10-15 years of service. |  |  |  |
|  | Warranted against defects in materials and workmanship for a period of two year after commissioning or 26 months after shipment, whichever is first. |  |  |  |
|  | 2-year consumable spare parts for PSA system, Air Compressor and oxygen cylinder filling compressor included in the offer. |  |  |  |
|  | Additional necessary emergency spare parts should be included |  |  |  |
|  | **Requirements: Delivery and Installation:** |  |  |  |
|  | Proposed schedule of manufacture, shipping, clearing, transportation to site, installation, testing, commissioning, and training. |  |  |  |
|  | 24/7 Local presence in Nigeria or a long-term service agreement with a local biomedical engineering company. |  |  |  |
|  | At least 5 years presence in Nigeria. |  |  |  |
|  | Shortest delivery period desirable. |  |  |  |
|  | Installation cost included in offer. |  |  |  |
|  | **TRAINING.** |  |  |  |
|  | Training offered for 2 engineers to ensure transfer of technology and also future maintenance. |  |  |  |
|  | 5 days minimum full factory training. |  |  |  |
|  | Training scope: Assembly, maintenance, repair and service of the Oxygen generator, compressors and refilling station. |  |  |  |
|  | **PRICE OF DELIVERY TO INCLUDE** |  |  |  |
|  | DAP to Maiduguri and Bui Hospitals (necessary logistical arrangements related to getting the goods in the location indicated. Including Import Clearance Services & Unloading ) |  |  |  |
|  | **ALL BROCHURES, MANUALS, CERTIFICATIONS, WARRANTY DOCUMENTS AND SPECIFICATIONS SHOULD BE PROVIDED** |  |  |  |

**Delivery requirements –– Comparative Data Table**

See Section II: Schedule of Requirements

| **UNOPS Requirements** | | **Is bid compliant?** Bidder to complete | **Details**  Bidder to complete |
| --- | --- | --- | --- |
| **Delivery time** | Bidder shall deliver the goods within 8 weeks after Contract signature. | ☐ Yes ☐ No | Insert details |
| **Delivery place and Incoterms rules** | 1.DAP State Specialist Hospital Maiduguri  2. DAP General Hospital Biu  Bidder shall facilitate all the necessary logistical arrangements related to getting the goods in the location indicated. Including Import Clearance Services & Unloading  Delivery and installation at State Specialist Hospital, Maiduguri and General Hospital, Bui. | ☐ Yes ☒ No | Insert details |
| **Consignee details** | The Project Manager, UNOPS, Nigeria  Attn: Atinuke Adeoti Fakunle | ☐ Yes ☐ No | Insert details |
| **UNOPS Right to vary requirements** | At the time the Contract is awarded, UNOPS reserves the right to vary the quantity of the goods and associated services specified above, provided this does not exceed +/- 20%,without any change in the unit prices or other terms and conditions of the RFQ. | ☐ Yes ☐ No | Insert details |

**Related services requirements**

See Section II: Schedule of Requirements

The offered goods and related services (if applicable) are in accordance with the required specifications and requirements specified in **Section II: Schedule of Requirements**.

☐ Yes ☐ No

ANY DEVIATION MUST BE LISTED BELOW:

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

**List of subcontractors or suppliers**

Bidder must identify the names of all subcontractors/suppliers who will be providing good/services under this contract and the type of work being subcontracted, if applicable.

1. \_[Full legal name and address of subcontractors]\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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:

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Form E: Bidder Information Form**

The Bidder shall fill in this Form in accordance with the instructions indicated below. No alterations to its format shall be permitted and no substitutions shall be accepted.

RFQ reference no: [insert RFQ reference No.]

Name of Bidder: [insert name of bidder]

Date: [insert submission date]

1. **Background and Expertise of Organization:**

| **Full legal name of Bidder** | [complete] |
| --- | --- |
| **What year was your firm/organization established?** | [complete] |
| **Address of registered office** | [complete] |
| **Name of bidder Representative** | complete] |
| **Has your firm/organization ever filed or petitioned for bankruptcy?** (If YES, explain in detail the reasons why, filing date, and current status.) | [complete] |
| **Does your firm have an actual or potential conflict of interest in this procurement process?** (Refer to Section II: Instructions to Bidders, Article 4, for details on conflict of interest) | [Insert either “No”, or “Yes” in which case please provide details on your actual or potential conflict of interest here] |

1. **UNGM Registration and UNOPS Vendors**

As part of the bid, it is desired that the Bidder goes to the United Nations Global Marketplace (UNGM) registration website: <https://www.ungm.org/Registration/RegisterSupplier.aspx> and fills out the registration.

If the Bidder is already registered with UNGM, please provide your UNGM registration number in the table below and please ensure that your firm’s information on UNGM is current.

The Bidder may still bid even if not registered with the UNGM. However, if the Bidder is selected for Contract award, the Bidder must register on the UNGM prior to Contract signature.

| **Are you a UNGM registered vendor?** | ☐ Yes ☐ No If yes, [insert UGNM vendor number] |
| --- | --- |
| **Are you a UNOPS vendor?** | ☐ Yes ☐ No If yes, [insert UNOPS vendor ID] |

1. **Contact details of persons that UNOPS may contact for requests for clarification during bid evaluation:**

| **Name/Surname** | [complete] |
| --- | --- |
| **Title** | [complete] |
| **Tel Number (direct)** | [complete] |
| **Email address (direct):** | [complete] |

PS: This person must be available during the next two weeks following receipt of bid

**Form F: Manufacturer’s Authorisation Form**

[To be eligible for delivery of goods, the bidder must be either the manufacturer of the offered goods or an appointed representative of the manufacturer to UNOPS for the purpose of this bidding process.

If you are not a manufacturer of the goods required under this RFQ, a letter issued by the manufacturer authorizing you to participate in this particular RFQ must be submitted with the bid in the format provided in this Form. Non-submittal of this form or submission of an incomplete/unsigned form shall lead towards automatic disqualification of your bid.

Should offers for a particular make and model be received from more than one appointed representative, UNOPS reserves the right to select only one.]

RFQ reference no**:**

Name of Bidder: [insert name of bidder]

Date: [insert submission date]

**To: UNOPS Ghana Multi-Country Office**

**Nigeria Office**

**WHEREAS**

We ***[insert complete name of manufacturer***], who are official manufacturers of [***insert type of goods manufactured],*** having factories at ***[insert full address of manufacturer’s factories***], do hereby authorize ***[insert complete name of bidder]*** to submit a bid the purpose of which is to provide the following goods, manufactured by us ***[insert name and or brief description of the goods]***, and to subsequently negotiate and sign the contract.

We hereby extend our full guarantee and warranty in accordance with Clause 4.5 of the General Conditions of Contract for the Provision of Goods, with respect to the goods offered by the above firm.

Signed: [***insert signature(s) of authorized representative(s) of the manufacturer]***

Name***: [insert complete name(s) of authorized representative(s) of the manufacturer]***

Title: ***[insert title]***

Dated on \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_ ***[insert date of signing]***

**Form G: Performance Statement Form**

**Bidders must use the form below to demonstrate compliance to relevant *Qualification Criteria*.**

RFQ reference no: [insert RFQ reference No.]

Name of Bidder: [insert name of bidder]

Date: [insert submission date]

| **Order placed by (Full address of purchaser)** | **Order no & date** | **Description & quantity of ordered items** | **Value of Order** | **Date of completion of Delivery** | | **Remarks indicating reasons of late delivery, if any** | **Was the supplies of goods satisfactory** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **As per Contract** | **Actual** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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