**Section III: Returnable Bidding Forms**

**Note to Bidders:** **Instructions to complete each Form are highlighted in blue in each Form. Please complete the Returnable Bidding Forms as instructed** **and return them as part of your quotation.**

The following returnable forms are part of this RFQ and must be completed and returned by bidders as part of their Quotation.

**E sourcing reference: Procurement of Motorbike in Myanmar – RFQ/2021/25233**

This Section comprises the following Returnable Bidding Forms:

* Form A: Quotation Submission Form
* Form B: Price Schedule Form
* Form C: Technical Quotation and Delivery Requirement Form
* Form D: Performance Statement Form (Starting from 2019)
* Form E: Supplier Registration Form (For New Supplier)
* Product Catalogue of Offered Items
* Copy of the company registration certificate or Business License.
* The list of the branches/agents that can provide the after-sales service within the warranty period in the major cities of Myanmar.
* Copy of Valid ISO 9001 - 2008 certified or equivalent quality standard documents
* Commitment to Gender Equality: The Bidder must provide -

1) the organization chart of all key personnel by roles including the share of male and female employed at the company in the percentage based on the total number of employees in major roles of the company

2) the commitment letter of the organizations’ most responsible person to support gender equality and women’s empowerment through its operation.

**Form A: Quotation 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: Quotation for the supply of “Motorbike” *in******Myanmar*** *RFQ Case No.* ***RFQ/2021/25233*** *dated* ***12-Aug-2021.***

*We, the undersigned, declare that:*

* *We offer to supply in conformity with the bidding documents, including the UNOPS General Conditions of Contract;*
* *Our quotation shall be valid for the period of time of* ***30 days*** *from the date fixed for the 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;*
* *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.*
* *Our firm confirms that the offer or 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 reference and/or other documents used as a part of this solicitation;*
* *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 3, Eligibility;*
* *We embrace the UN Supplier Code of Conduct and adhere to the principles of the UN Global Compact;*
* *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;*
* *We have not offered and will not offer fees, gifts and/or favor of kind in exchange for this RFQ and will not engage in any such activity during the performance of any Contract awarded.*

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

Name: [complete]

Title: [complete]

Date: [complete]

Signature and Company Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide the name and contact information for the primary contact from your company for this quotation:

Name: [complete]

Title: [complete]

Email address: [complete]

Telephone: [complete

**Form B: Price Schedule Form**

**RFQ reference no: [RFQ/2021/25233]**

**Name of Bidder: [insert name of bidder]**

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

**Prices for Goods**

| Item No. | Description | Quantity (Pcs) | Incoterm: DAP Final Destination (Unloaded) | | |
| --- | --- | --- | --- | --- | --- |
| Currency | Unit Price | Total Price |
| 1 | Motorbike 110 cc | 27 |  |  |  |
| 2 | Motorbike 125 cc | 6 |  |  |  |
| **Total Amount** | | **33** |  |  | |

***List of The Services Required:***

The supplier may be required to provide all of the following services, including additional services, if any, specified in SCC:

* For the motorbike to be supplied, the supplier shall make its own arrangement for getting import clearance from the Government of Myanmar, any licensing and other regulatory requirement, registration number on motorbike, owner book and the custom clearance and any other clearances till delivery to final destinations. Any charges related to all regulatory and other requirements have to be paid by the supplier.
* There is no customs duty for supplies to the UN by using consignee as UNOPS. UNOPS will provide the necessary custom duty exemption certificate for the awarded order quantity upon request.

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 and Company Stamp : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Form C: Technical Quotation and Delivery Requirement Form**

**RFQ reference no: RFQ/2021/25233**

**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 quotation.

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

**Item – 1 : Motorbike 110 cc**

| **UNOPS Requirement** | | **Please fill the data of your offered product**  **(Please don't copy our requirement)** |
| --- | --- | --- |
| Engine Power | Approximate 108 - 113 cc |  |
| Engine Type | 4 strokes |  |
| Speed | 4 speed |  |
| Starter | Both Kick and Electric Start |  |
| Break (Front/Rear) | Front - Disk/ Rear - Drum |  |
| Cooling System | Air Cooled |  |
| Fuel tank | To be advised by the bidder |  |
| License | To be applied by the supplier with the name of the recipients' organization |  |
| Accessories | To be included with Safety Helmet - 2 Pcs per unit and Tool Box |  |
| Warranty | 1 Year Warranty after sales services |  |
| Quality Management | ISO 9001 - 2008 certified or equivalent quality standard |  |
| Brand | To be provided by the bidder |  |
| Model | To be provided by the bidder |  |
| Country of origin | To be provided by the bidder |  |

**Item – 2 : Motorbike 125 cc**

| **UNOPS Requirement** | | **Please fill the data of your offered product**  **(Please don't copy our requirement)** |
| --- | --- | --- |
| Engine Power | 120-125 cc (Approx) |  |
| Engine Type | 4 strokes |  |
| Speed | 4 speed |  |
| Starter | Both Kick and Electric Start |  |
| Break (Front/Rear) | Front - Disk/ Rear - Drum |  |
| Cooling System | Air Cooled |  |
| Fuel tank | To be advised by the bidder |  |
| License | To be applied by the supplier with the name of the recipients' organization |  |
| Accessories | To be included with Safety Helmet - 2 Pcs per unit and Tool Box |  |
| Warranty | 1 Year Warranty after sales services |  |
| Quality Management | ISO 9001 - 2008 certified or equivalent quality standard |  |
| Brand | To be provided by the bidder |  |
| Model | To be provided by the bidder |  |
| Country of origin | To be provided by the bidder |  |

**Note : Deviation in technical specification of the offered product would be acceptable if the functionality of the product would not be affected.**

* **Delivery requirements –– Comparative Data Table**

| UNOPS Requirements | | **Is quotation compliant? Bidder to complete** | **Details**  **Bidder to complete if NO** |
| --- | --- | --- | --- |
| Delivery time | **If Tax Exemption is required**  · Bidder shall provide the shipping documents within 30 days from date of signing of Purchase Order to apply Tax Exemption.  · Bidder shall complete the number plate registration within 60 days from the date of handing over the Tax Exemption Certificate.  · Bidder shall deliver the goods within 30 days after completion of number plate registration and issue of owner book. | ☐ Yes ☐ No |  |
| **If Tax Exemption is not required**  · Bidder shall complete the number plate registration within 90 days from date of signing of Purchase Order.  · Bidder shall deliver the goods within 30 days after completion of number plate registration and issue of owner book. | ☐ Yes ☐ No |  |
| Delivery place and Incoterms rules | **Delivery Place**  As per below delivery breakdown.  **Incoterm Rules**  DAP (Final Destination-Unloaded) In addition, suppliers will be responsible for customs clearance at Myanmar seaport if required. UNOPS will provide a Tax exemption certificate upon request. |  |  |
| Consignee details | UNOPS, Myanmar |  |  |
| Owner Book Names | As per the name of the Programme provided in delivery breakdown | ☐ Yes ☐ No |  |
| 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 ITB. | ☐ Yes ☐ No |  |

**Delivery Breakdown**

| **Item No.** | **Product** | **Name of Programme** | **Total Qty (Pcs)** | **Area Wise Qty (Pcs)** | **Delivery Township** |
| --- | --- | --- | --- | --- | --- |
| 1 | Motorbike 110 cc | PGK (TB) | 3 | 3 | Room-203 Yankin Garden Residence,Yankin Township,Yangon. |
| MHAA-TB | 24 | 9 | Chaung U Township, Sagaing Region |
| 8 | No. 7, Aung Awba Street, Pakokku Township. Magway Region |
| 7 | Tike Thit Tan, Pyi taw Thar Ward, Lan Ma Gyi, Sittwe Township. |
| 2 | Motorbike 125 cc | MANA | 4 | 2 | Kyunhla, Sagaing Region |
| 2 | Pyigyitagon, Mandalay |
| MHAA-MAL | 2 | 2 | Shwegyin Township |

**Note :**

On reception, in case of the detection of a defective product either in the quality of a product or in any other aspects such as packaging, the Supplier will be requested to replace the complete quantity at its own cost.

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 and Company Stamp : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Form D: Performance Statement Form (Starting from 2019)**

RFQ reference no: RFQ/2021/25233

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 supply of goods satisfactory?** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **As per Contract** | **Actual** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

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

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

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

Signature and Company Stamp : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Form E: Supplier Registration Form (For New Supplier)**

| **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/mmm/yyyy) | | | **Valid to**  (dd/mmm/yyyy) | |
|  | | | | | | |  | | | |  | | |  | |
| **UNGM Number\*** | |  | | | | **VAT registration no.** | | | |  | | | | | |
| **Country** | |  | | | | **Date of birth**  (dd/mmm/yyyy) | | | | (For individuals only) | | | | | |
| **Identity Document Type** | | **National ID** | | | **Passport** | | | | **Other, please specify:** | | | |  | |  |
| **Identity document no.** | |  | | | | **Issue date**  (dd/mmm/yyyy) | |  | | | **Expiry date**  (dd/mmm/yyyy) | | |  | |
| **Supplier Group (Select one of the below options)** | | | | | | | | | | | | | | | |
| Company (Private or Public)\*  External Individual  Financial institution (including insurance and banking) | | | | | University/educational institution  IGO(Intergovernmental Organization)  NGO(Nongovernmental Organization) | | | | UN Agency /Institution  Government Agency | | | |  | |  |
| \* UNOPS requires Companies to register with the United Nations Global Marketplace on [www.ungm.org](http://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** | | | | Checking  Saving  Current  Cheque  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** | |  | | | **SWIFT/BIC code** |  | | | | **Clearing code/bank code** | |  | | | |
| **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.** | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | |
| **Supplier/Supplier's Representative’s Signature and Stamp** | | | | | | | | | | **Date and Place** | | | | | |

| **SECTION 4: SUBMISSION INFORMATION** (for UNOPS focal point to complete) | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **oneUNOPS supplier no.** | **Is this new or an update to an existing supplier profile?** | | **Bank detail change** | | **UNGM Ineligibility Lists/Claims Log check** | | **Supplier/Vendor have direct agreement/contract with**  **UNOPS** | | **Supplier/Vendor paid via cash supplier?** | |
|  | New | Update existing supplier | Yes | Yes  No |  | Yes  No | Yes  No |  | Yes  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** | | |