# Schedule of Requirements

**Technical Specifications for Goods:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Items\*** | **Descriptions / Specifications of Goods** | **Unit of Measure** | **AC Capacity in Ton** | | | **Qty.** | **Location** |
| **1** | **1.5** | **2** |  |
|  | * "AC spilt unit * Inverter Technology * Cooling & heating * Energy Class Warner +A * Cooling Energy Class A++ * R410 ozone friendly refrigerant * Quiet Operation * Self-Cleaning * Auto & 3-Step Fan speed Setting * LCD Wireless Remote Control * Digital screen * 24-Hour On/Off Timer * Dual Drain Setting" * Color: White |  | **1** | **0** | **3** | **4** | **Maghareb Alsalt**  **2MRX+M8R** |  |
| Air Conditioners | EA | **0** | **3** | **1** | **4** | **Turrah/ Irbid**  32°38'20.3"N 35°59'31.1"E   32.638972, 35.991972 |  |
| **0** | **1** | **0** | **1** | **Sammah/Irbid**  32°38'20.3"N 35°59'31.1"E   32.638965, 35.991975 |  |
| **0** | **1** | **1** | **2** | **ALShallaleh /AQABA**  29°31'27.6"N 35°00'48.4"E  29.524333, 35.013444 |  |
| **2** | **3** | **0** | **5** | **South/ Madaba**  PQ8J+X2 Madaba |  |
| **0** | **0** | **3** | **3** | **Eis Center** / **Al Tafila** 30°49'54.1"N,35°38'27.9"E  30.831704,35.641091 |  |
| **Total** | | **EA** | **3** | **8** | **8** | **19** |  |  |

**Delivery Requirements:**

|  |  |
| --- | --- |
| **Delivery Requirements** | |
| **Delivery date and time** | Vendor shall deliver the goods within one month. after Contract/PO signature. |
| **Delivery Terms (**[**INCOTERMS 2020**](https://iccwbo.org/resources-for-business/incoterms-rules/incoterms-2020/)**)** | DAP to the delivery locations stated above |
| **Customs clearance**  **(must be linked to INCOTERM)** | ☒ Not applicable  Shall be done by:  ☐ Name of organization  ☐ Vendor/bidder  ☐ Freight Forwarder |
| **Exact Address(es) of Delivery Location(s)** | As per stated above |
| **Distribution of shipping documents (if using freight forwarder)** | All items to be packed and delivered safely to the locations |
| **Warranty Period** | Three years for outdoor unit and One year for indoor |
| **After-sales service and local service support requirements** | After sales services and support should be provided |
| **Preferred Mode of Transport** | Land |
| **Subcontracting** | The vendor is strongly encouraged not to sub-contract > 50% of the total work. If a vendor/s intend to do so, they must state the actual percentage (that will be outsourced) in their offer/quotation. |

**Special Requirements**

* **Kindly provide us with catalogues for the quoted items.**
* **Please also provide us with any quality assurance certificates.**
* **Vendors shall provide any needed maintenance in the location during the warranty period and at time if needed.**
* **Installation cost to be included in the quotations.**

If the goods fail to meet the laid down specifications, the vendor shall take immediate steps to remedy the deficiency or replace the defective goods to the satisfaction of UN Women.

# Technical and Financial Offer

***Vendors are requested to complete this form, sign it and return it as part of their quotation****. The Vendor 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. Instructions on inclusion of VAT and other direct/indirect taxes are included in the solicitation documents and shall be followed when preparing the financial proposal.*

|  |  |  |
| --- | --- | --- |
| Name of Vendor: | Click or tap here to enter text. | |
| RFQ reference: | Click or tap here to enter text. | Date: Click or tap to enter a date. |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | **Currency of the Quotation: JOD** | | |
| **INCOTERMS: DAP** | | |
| **Item No** | **Description** | **UOM** | **QTY Per Ton** | | | |
| **1** | | **1.5** | **2** |
| A/C |  | **Piece** | **3** | | **8** | **8** |
| * "AC spilt unit * Inverter Technology * Cooling & heating * Energy Class Warner +A * Cooling Energy Class A++ * R410 ozone   friendly refrigerant   * Quiet Operation * Self-Cleaning * Auto & 3-Step Fan speed Setting * LCD Wireless Remote Control * Digital screen * 24-Hour On/Off Timer * Dual Drain Setting" * Color: White |
|  |
|  |
|  |
|  |
| **Total Qty** | | | **3** | | **8** | **8** |
| **Unit Price JOD** | | |  | |  |  |
| **Total Price JOD** | | |  | |  |  |
| **Transportation Price JOD** | | |  | |  |  |
| **Installation Price JOD** | | |  | |  |  |
| **Total Final and All-inclusive Price JOD** | | | |  |  |  |

***Note*: *In case of discrepancy between unit price and total, the unit price shall prevail.***

**Compliance with Requirements:**

|  |  |  |  |
| --- | --- | --- | --- |
| Requirement | Your Responses | | |
| Yes, we will comply | No, we cannot comply | If you cannot comply, pls. indicate counter proposal |
| Minimum Technical Specifications | ☐ | ☐ | Click or tap here to enter text. |
| Delivery Term (DAP) | ☐ | ☐ | Click or tap here to enter text. |
| Delivery Lead Time within one month after PO issuance | ☐ | ☐ | Click or tap here to enter text. |
| Warranty and After-Sales Requirements 3 years for out door and 1 year for indoor | ☐ | ☐ | Click or tap here to enter text. |
| Validity of Quotation 90 days | ☐ | ☐ | Click or tap here to enter text. |
| Payment terms after 30 days from the saticfactory of receving the goods. | ☐ | ☐ | Click or tap here to enter text. |

**Other Information:**

|  |  |
| --- | --- |
| Estimated weight/volume/dimension of the Consignment: | Click or tap here to enter text. |
| Country/ies of Origin:  (*if export licence required this must be submitted if awarded the contract*) | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| I, the undersigned, certify that I am duly authorized to sign this quotation and bind the company below in event that the quotation is accepted. | | | |
| Company Name: | Click or tap here to enter text. | Authorized Signature: |  |
| Address: | Click or tap here to enter text. | Date: | Click or tap here to enter text. |
| Phone No.: | Click or tap here to enter text. | Functional title of Authorized Signatory: | Click or tap here to enter text. |
| E-mail address: | Click or tap here to enter text. | E-mail address: | Click or tap here to enter text. |