**Section III: Returnable Bidding Forms**

eSourcing reference: RFQ/2022/43147

**Note to Bidders: The following returnable forms are part of this RFQ and must be completed and returned by bidders as part of their quotation. 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 by uploading them against their specific Document Checklist in the UNOPS eSourcing system.**

**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 services of** ***Energy Secure Health Infrastructure Energy Audit and Clean Energy Plan*****in*****Cambodia*,** RFQ Case No. [RFQ/2022/43147], dated **12/08/2022**

We, the undersigned, declare that:

* 1. We offer to supply in conformity with the bidding documents, including the UNOPS General Conditions of Contract;
  2. Our quotation shall be valid for the period of time of **[60 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;
  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. [If you have any actual or potential conflict of interest as defined in Article 3 of Section I: Instructions to Bidders, please disclose it here];
  4. Our firm confirms that the offeror 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;
  5. 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;
  6. We embrace the UN Supplier Code of Conduct and adhere to the principles of the UN Global Compact;
  7. We have not declared bankruptcy, are not involved in bankruptcy or receivership proceedings, and there is no judgement or pending legal action against them that could impair their operations in the foreseeable future;
  8. We have not offered and will not offer fees, gifts and/or favours 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 company name of bidder***] to sign this quotation and bind [***insert full company name of bidder***] should UNOPS accept this quotation:

Name: [complete]

Title: [complete]

Date: [complete]

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

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

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

RFQ reference no: RFQ/2022/43147

| **Currency** | USD (US Dollars) |
| --- | --- |

| **Lot No** | **Description** | **Qty** | **Unit price [Incoterms]** | **Total price [Incoterms]** |
| --- | --- | --- | --- | --- |
| Lot no. 1 Energy Audit | 1.A Total costs for the Energy Audit performance at Kampong Cham Provincial Referral Hospital, Kampong Cham Province | 1 | insert | insert |
| 1.B Total costs for the Energy Audit performance at Khmer Soviet Friendship Hospital, Phnom Penh | 1 | insert | insert |
| **Sub total for Lot 1** | | | | |
| Lot no. 2 Clean Energy Plan | 2.A Total costs for the Clean Energy Plan Development at Kampong Cham Provincial Referral Hospital, Kampong Cham Province | 1 | insert | insert |
| 2.B Total costs for the Clean Energy Plan Development at Khmer Soviet Friendship Hospital, Phnom Penh | 1 | insert | insert |
| **Sub Total for Lot 2** | | | |  |
| **Total Price excluding VAT** | | | | insert |

**Table 2: Cost breakdown per Location**

Bidders are requested to provide the cost breakdown for the above given prices based on the following format. UNOPS shall use the cost breakdown for the price reasonability assessment purposes as well as the calculation of price in the event that both parties agree to a contract amendment in the future.

1. **Lot no. 1: Energy Audit**

| **Location 1 : Total costs for the Energy Audit performance at Kampong Cham Provincial Referral Hospital, Kampong Cham Province** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A. Personnel Cost** |  | |  | |  | |  |  |
| **Names of Consultant** | **Designation /Nationality** | | **Number of days** | | **Daily Fee** | | **Allowance** | **Total (USD)** |
| (List proposes personnel here) |  | |  | |  | |  |  |
|  |  | |  | |  | |  |  |
| **B. Other Costs** | **Description** | | **Quantity** | | **Unit Cost** | |  | **Total (USD)** |
| Travel Costs |  | |  | |  | |  |  |
| Communications |  | |  | |  | |  |  |
| Printing |  | |  | |  | |  |  |
| Other Costs (to specify) |  | |  | |  | |  |  |
| (List other cost here) |  | |  | |  | |  |  |
| **Total Price for location 1** | | | | | | | |  |
|  | |  |  |  | |  | |  |
| **Location 2: Total costs for the Energy Audit performance at Khmer Soviet Friendship Hospital, Phnom Penh** | | | | | | | | |
| **A. Personnel Cost** |  | |  | |  | |  |  |
| **Names of Consultant** | **Designation /Nationality** | | **Number of days** | | **Daily Fee** | | **Allowance** | **Total (USD)** |
| (List proposes personnel here) |  | |  | |  | |  |  |
|  |  | |  | |  | |  |  |
| **B. Other Costs** | **Description** | | **Quantity** | | **Unit Cost** | |  | **Total (USD)** |
| Travel Costs |  | |  | |  | |  |  |
| Communications |  | |  | |  | |  |  |
| Printing |  | |  | |  | |  |  |
| Other Costs (to specify) |  | |  | |  | |  |  |
| (List other cost here) |  | |  | |  | |  |  |
| **Total Price for location 2** | | | | | | | |  |

1. **Lot no. 2 Clean Energy Plan**

| **Location 1: Total costs for the Clean Energy Plan Development at Kampong Cham Provincial Referral Hospital, Kampong Cham Province** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A. Personnel Cost** |  | |  | |  | |  |  |
| **Names of Consultant** | **Designation /Nationality** | | **Number of days** | | **Daily Fee** | | **Allowance** | **Total (USD)** |
| (List proposes personnel here) |  | |  | |  | |  |  |
|  |  | |  | |  | |  |  |
| **B. Other Costs** | **Description** | | **Quantity** | | **Unit Cost** | |  | **Total (USD)** |
| Travel Costs |  | |  | |  | |  |  |
| Communications |  | |  | |  | |  |  |
| Printing |  | |  | |  | |  |  |
| Other Costs (to specify) |  | |  | |  | |  |  |
| (List other cost here) |  | |  | |  | |  |  |
| **Total Price for location 3** | | | | | | | |  |

| **Location 2: Total costs for the Clean Energy Plan Development at Khmer Soviet Friendship Hospital, Phnom Penh** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A. Personnel Cost** |  | |  | |  | |  |  |
| **Names of Consultant** | **Designation /Nationality** | | **Number of days** | | **Daily Fee** | | **Allowance** | **Total (USD)** |
| (List proposes personnel here) |  | |  | |  | |  |  |
|  |  | |  | |  | |  |  |
| **B. Other Costs** | **Description** | | **Quantity** | | **Unit Cost** | |  | **Total (USD)** |
| Travel Costs |  | |  | |  | |  |  |
| Communications |  | |  | |  | |  |  |
| Printing |  | |  | |  | |  |  |
| Other Costs (to specify) |  | |  | |  | |  |  |
| (List other cost here) |  | |  | |  | |  |  |
| **Total Price for location 4** | | | | | | | |  |

Payment terms 30 days accepted: ☐ Yes

The 10% VAT will be applied in the invoice ☐ Yes ☐ No

Payment will be made 100% after the completion of activities at each location, submission of the Final

Report and satisfactory acceptance by UNOPS Cambodia: ☐ Yes

**Bidder’s discount for accelerated payment:** \_\_\_\_% of total firm price for each calendar day less than thirty (30) days

**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 quotation and bind [***insert full name of Bidder***] should UNOPS accept this quotation:

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

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

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

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

# Form C: Technical Quotation Form

RFQ reference no: RFQ/2022/43147

Name of Bidder: [insert name of Bidder]

The bidder’s proposal must be organised to follow the format of this Technical Proposal Form. Where the bidder is presented with a requirement or asked to use a specific approach, the bidder must not only state its acceptance, but also describe, where appropriate, how it intends to comply. Where a descriptive response is requested, failure to provide the same will be viewed as non-responsive.

1. **KEY PERSONNEL**

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

1. *the key personnel that the Bidder proposes to assign to the provision of the Services;*
2. *the qualifications and relevant experience of each of the key personnel that the Bidder proposes to assign to the provision of the services, including a CV/resume for each of the key personnel;*
3. *the proposed organisational structure for providing the services. 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**

| No | Position Description | Name | Age | Years of  Experience | Relevant  Experience | Qualification | Consultant/  In-House | Nationality |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

1. Attach a CV using below format and attach a copy of the academic certificate for each person.

2. For Consultants, attach the current Letter of Consent.

**CV Format**

**1 General**

1.1 Name

1.2 Capacity

1.3 Age

1.4 Nationality

1.5 Working languages and degree of proficiency

1.6 Date of joining (if permanent staff member of firm)

1.7 Specialty

1.8 Official position in the firm and title

1.9 Duration of assignment (if any)

**2 Qualifications**

(list each stage of professional education and other training beginning with the most recent).

2.1 Period: From: To:

Name of Institution:………………………………….

Examination passed, Class, Grade:……………………………..

Field(s) of competence:

2.2 Period: From: To:

Name of Institution:………………………………….

Examination passed, Class, Grade:……………………………..

Field(s) of competence:

**3 Professional Experience**

(List each different professional experience, for every employment held, beginning with the most recent).

3.1 Period From: To:

Name of Employer

Description of work indicating location, etc.

Position held in that project

Title, location and description of major projects, etc., for each additional employer.

Signature of Personnel Signature of Applicant Date:

**B. OUTLINE STATEMENT OF PROPOSED METHODS**

*Note to Bidders: Bidder shall provide a detailed method statement setting out:*

1. *how it proposes to provide the services;*

***Method statement of the Energy Audit performance & Clean Energy Plan Development:***

1. The bidder’s proposed method statement/ methodology demonstrates the bidder’s understanding of the objective, scope of works, available requirements, technologies to meet the requirements of the TOR, work capacity to plan and execute the work in a professional and stage manner*;*

**Work Plan**

Detailed and realistic work plan & Resource plan including organization chart, staff inputs, milestones for the durations of the assignment.

The offered services (if applicable) are in accordance with the required schedule of requirements specified in **Section III: Schedule of Requirements/ Term of Reference.**

☐ Yes ☐ No

ANY DEVIATION MUST BE LISTED BELOW:

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

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

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

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

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

# Form D: Previous experience form

RFQ reference no: RFQ/2022/43147

Name of Bidder: [insert name of Bidder]

| **Description of services/goods** | **Country** | **Total amount of Contract** | **Contract Identification and Title and**  **Contact details of Client**  **(Name, Address, telephone, email, fax)** | **Year project was undertaken** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

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

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

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

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

**75 00ax: +45 45 33 75 01**