**Section III: Returnable Bidding Forms**

**eSourcing reference:** ITB/2022/46755

Note to Bidders: The following returnable forms are part of this ITB 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: Performance Statement Form
* Form F : After Sales Service Agent Performance Statement Form
* Form G: Manufacturer’s authorization form

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

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

ITB reference no: ITB/2022/46755

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*],** ITB Case ITB/2022/46755

**,** 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:

Lot No1 : ----------------------------------------------------------------------------------------------------------

* 1. 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 ITB, 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 B: Price Schedule Form**

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

RFQ reference no: ITB/2022/46755

|  |  |
| --- | --- |
| **Currency** | **USD** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lot No** | **Description** | **Quantity**  **(A)** | **Unit DAP, Male, Maldives (B)** | **Total price DAP, Male, Maldives Price –**  **C= (A)x(B)** |
|
| 1 | Medical delivery drones | 02 units |  |  |
| Total Cost - Lot No 1 | | | |  |

**Drone operation cost for a period of 12 months**

**Important : Below section will not be a form part of the Financial offer and therefore will NOT be evaluated together with the financial offer for Lot-01**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item No** | **Description** | **Quantity**  **(A)** | **Total price (USD)** |
| 1 | Operation of drones between two locations (two islands) in the Maldives for a period of 12 months | 01 |  |
| Total Cost -Item No-01 (USD) | | |  |

Payment terms 30 days accepted: ☐ Yes

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

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: ITB/2022/46755

Name of Bidder: [insert name of Bidder]

Bidders are required to complete the **Comparative Data Tables** included in Section III: 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 and Comparative Data Table:**

**Lot 1: Medical Delivery Drones**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No** | **Technical Specification** | **Bidder’s Offer** | | | |
| **Conformity** | | **Remarks** | |
| **Yes** | **No** |
| 01 | **Medical Delivery Drones** | | | | |
| Brand |  | | | |
| Model |  | | | |
| Manufacturer |  | | | |
| Country of origin and manufacturing |  | | | |
| **A. DRONE TYPE AND QUANTITY** |  |  | |  |
| 1. Vertical take-off and landing (VTOL) - Electronic | ☐ Yes | ☐ No | |  |
|  | 2. Supplier should deliver 2 drones | ☐ Yes | ☐ No | |  |
|  | **B. FLIGHT MODES** |  |  | |  |
|  | 1. Automatic mission | ☐ Yes | ☐ No | |  |
|  | 2. Return-to-home | ☐ Yes | ☐ No | |  |
|  | 3. Manual go-to function | ☐ Yes | ☐ No | |  |
|  | 4. Emergency procedures | ☐ Yes | ☐ No | |  |
|  | **C. WEIGHT (MAXIMUM)** |  |  | |  |
|  | 1. 20Kg with batteries (without payload) | ☐ Yes | ☐ No | |  |
|  | **D. PAYLOAD (MINIMUM)** |  |  | |  |
|  | 1. 2.5 kg (payload weight) | ☐ Yes | ☐ No | |  |
|  | 2. Medical Payload boxes must be provided with the drones | ☐ Yes | ☐ No | |  |
|  | **E. BATTERIES** |  |  | |  |
|  | 1. Lithium batteries | ☐ Yes | ☐ No | |  |
|  | 2. Vendor should provide extra two batteries for each drone. | ☐ Yes | ☐ No | |  |
|  | **F. SENSORS** |  |  | |  |
|  | 1. Magnetometers | ☐ Yes | ☐ No | |  |
|  | 2. Inertial Measurement Units (IMU) | ☐ Yes | ☐ No | |  |
|  | 3. 2 x Dual-antenna Global Navigation Satellite System (GNSS) | ☐ Yes | ☐ No | |  |
|  | 4. Airspeed sensor | ☐ Yes | ☐ No | |  |
|  | 5. Lidar Altimeter | ☐ Yes | ☐ No | |  |
|  | 6. Front and down-facing camera | ☐ Yes | ☐ No | |  |
|  | 7. Automatic Dependent Surveillance-Broadcast (ADS-B) in/out | ☐ Yes | ☐ No | |  |
|  | 8. Flight Alarm (FLARM) | ☐ Yes | ☐ No | |  |
|  | **G. CONNECTIVITY** |  |  | |  |
|  | 1. Cellular telemetry (3G/ 4G) | ☐ Yes | ☐ No | |  |
|  | 2. Radio telemetry (Mesh Network) | ☐ Yes | ☐ No | |  |
|  | 3. Drone should be capable to integrate Sattelite (Iridium) telemetry system if needed. | ☐ Yes | ☐ No | |  |
|  | **H. FLIGHT SPEED (FIXED-WING MODE)** |  |  | |  |
|  | 1. Cruise speed must be higher than or equal to 15 m/s | ☐ Yes | ☐ No | |  |
|  | **I. CLIMB SPEED (MULTICOPTER MODE)** |  |  | |  |
|  | 1. Minimum 3 m/s climb rate | ☐ Yes | ☐ No | |  |
|  | 2. Minimum 2 m/s descent rate | ☐ Yes | ☐ No | |  |
|  | **J. WIND RESISTANCE HANDLING** |  |  | |  |
|  | 1. Minimum 12 m/s (Multicopter mode) | ☐ Yes | ☐ No | |  |
|  | 2. Minimum 15 m/s (With Wings) | ☐ Yes | ☐ No | |  |
|  | **K. WEATHER AND ENVIRONMENT** |  |  | |  |
|  | 1. Suitable for operation in coastal and offshore environment | ☐ Yes | ☐ No | |  |
|  | 2. Tropical climate | ☐ Yes | ☐ No | |  |
|  | **L. ALTITUDE (FIXED-WING MODE)** |  |  | |  |
|  | 1. 3000 m AMSL or higher | ☐ Yes | ☐ No | |  |
|  | **M. FLIGHT TIME** |  |  | |  |
|  | 1. Minimum 45 min (with 2kg payload) | ☐ Yes | ☐ No | |  |
|  | **N. FLIGHT RANGE (WITH 2 KG PAYLOAD)** |  |  | |  |
|  | 1. Minimum 35 km (Direct two-way flight) | ☐ Yes | ☐ No | |  |
|  | **O. GROUND CONTROL STATION** |  |  | |  |
|  | 1. Dedicated control station hardware | ☐ Yes | ☐ No | |  |
|  | **P. CONTROL SYSTEM** |  |  | |  |
|  | 1. Autonomous | ☐ Yes | ☐ No | |  |
|  | 2. Controller and autonomous autopilot | ☐ Yes | ☐ No | |  |
|  | 3. Drone must have a logistics software for easy management, route programming and notifications. Software should be provided for a minimum of 12 months. | ☐ Yes | ☐ No | |  |
|  | 4. When in autonomous mode, flight real-time visibility must be available through dashboard. | ☐ Yes | ☐ No | |  |
|  | 5. Vendor must provide a technical analysis and detailed overview of the drone communication system (program and other security features). | ☐ Yes | ☐ No | |  |
|  | 6. Drone should be able to integrate Unmanned Aircraft System Traffic Management (UTM) | ☐ Yes | ☐ No | |  |
|  | **Q. FAILSAFE** |  |  | |  |
|  | 1. Independent and dissimilar failsafe mechanism | ☐ Yes | ☐ No | |  |
|  | 2. Vendor must ensure drone override protection | ☐ Yes | ☐ No | |  |
|  | 3. Vendor shall provide other security and safety features of the drone | ☐ Yes | ☐ No | |  |
|  | **R. OPERATION, SUPPORT SERVICES, TRAINING AND WARRANTY** |  |  | |  |
|  | 1. Vendor should have experience of flying drone Beyond Visual Line of Sight (BVLOS) approved by European Union Aviation Safety Agency (EASA) by using Specific Operations Risk Assessment (SORA) methodology. | ☐ Yes | ☐ No | |  |
|  | 2. The vendor should have a local agent in the Maldives or consent to be given to have a local agent within 2 weeks from the date of contract award / details of the local agent. | ☐ Yes | ☐ No | |  |
|  | 3. Local vendor support should be available. | ☐ Yes | ☐ No | |  |
|  | 4. A minimum of 3 pilots will have to be trained for handling and operation of the drone as well as maintenance. | ☐ Yes | ☐ No | |  |
|  | 5. A minimum of 1-year vendor service warranty must be provided. | ☐ Yes | ☐ No | |  |
|  | 6. Vendor must install base stations on ground. | ☐ Yes | ☐ No | |  |
|  | 7. Ground handling of drones must be relatively easy and be able to be carried out with minimal training. Training for ground handling to be provided by the vendor. | ☐ Yes | ☐ No | |  |
|  | 8. Vendor must get necessary approvals to fly the drone before the start of the operation. (Ministry of Health will facilitate the drone operation approval process. Authority approval required in Maldives is: Maldives Civil Aviation Authority). | ☐ Yes | ☐ No | |  |
|  | 9.The drone will be operated in three locations (between three islands). | ☐ Yes | ☐ No | |  |
|  | 10. Vendor should quote separately for the drone operation in the Maldives for a period of 12 months. The quote rate should be given for the operation of drones between two locations (two islands) and can be extended based on need and requirement (Cost to be provided separately). The Ministry of Health may sign an agreement with the vendor to operate drones in the designated locations based on need and the availability of finance. | ☐ Yes | ☐ No | |  |
|  | 11. Vendor should provide the following spare parts with each drone (2propellers, 2Wings, 2Tails and 2Pitotubes). | ☐ Yes | ☐ No | |  |

**Delivery Schedule - Lot - 01**

|  |  |  |  |
| --- | --- | --- | --- |
| **UNOPS Requirements** | | **Is quotation compliant?** Bidder to complete | **Details**  Bidder to complete |
| **Delivery time** | Bidder shall deliver the goods within 8 Weeks after signature of contract. | ☐ Yes ☐ No | Insert details |
| **Delivery place and Incoterms rules** | Delivery place and Incoterms rules as per DAP Incoterms 2010 including unloading at site. The quoted DAP price must include all the costs associated for a satisfactory installation, commissioning and training of the all units under each lots.  Ministry of Health is tax exempted and the required tax exemption documents will be provided by them.  Drone base station locations:  Nominated three locations (islands) by the Ministry of Health, Maldives. | ☐ Yes ☐ No | Insert details |
| **Consignee details** | Ministry of Health, Maldives  Roashanee Building  Sosun Magu,  Male, Maldives | ☐ Yes ☐ No | Insert details |

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

☐ Yes ☐ No

ANY DEVIATION MUST BE LISTED BELOW:

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

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

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

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

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

**Form E: Performance Statement Form**

ITB reference no: ITB/2022/46755

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 as per Contract** | **Remarks indicating reasons of late delivery, if any** |
|
|  |  |  |  |  |  |
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Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

**Form F: After Sales Service Agent Performance statement Form – Lot - 01**

ITB reference no: ITB/2022/46755

Name of Bidder: [insert name of bidder]

Date: [insert submission date]

|  |  |
| --- | --- |
| Description | Please fill in |
| Number of years selling drone system in the worldwide |  |
| Authorized After sales Agent in Maldives | Name :  Address :  Telephone No :  Mobile No :  E-mail address: |

**Important**

If an after sales service agents is not available in the Maldives currently, bidder should submit a declaration that qualified after sale agents will be appointed within 2 weeks after signing the contract for the **Supply, Delivery, and Installation of Medical delivery Drone system.**

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

**Form G: Manufacturer’s authorization form**

A letter issued by the manufacturer authorizing the applicant to participate in this particular ITB must be submitted with the bid in the format provided in this Form.

To be eligible for delivery of goods, the bidder must be either the manufacturer of the offered goods or a sole representative of the manufacturer to the United Nations. Should offers for a particular make and model be received from more than one appointed representative, UNOPS reserves the right to select only one.

ITB reference no: [insert ITB reference No.]

Name of Bidder: [insert name of bidder]

Date: [insert submission date]

To: UNOPS

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]*