**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 their bid submission.**

**Esourcing reference: Supply of laboratory Consumables to Cambodia**

This Section comprises the following Returnable Bidding Forms:

* Form A: Quotation Submission Form
* Form B: Price Schedule Form
* Form C: Technical Quotation Form
* Form D: Delivery Requirement Form
* Form E: One UNOPS Vendor Profile Form

**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 laboratory Products to Cambodia**

**E-Sourcing case reference: RFQ/2023/48302, dated [XX XXX 2023]**

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 II: 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 judgment 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 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**

**ESourcing Ref No: Quotation for the Supply of laboratory Consumables to Cambodia – RFQ/2023/48302**

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

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

**As defined in Instructions to bidders, Article 3, bidders shall not submit more than one quotation. Alternative quotations shall not be allowed.**

**NOTE: Bidders shall be allowed to quote prices for one or more lots identified in this tender. However, bidders must offer 100% of the items specified for each lot and 100% of the quantities specified for each item of a lot. Evaluation will be done per lot.**

| **Lot** | **Item**  **No.** | **Item Description** | **Unit** | **Pack Size** | **Total Qty in Unit** | **Manufacturer/**  **Country of Origin** | **Offered Pack Size** | **Offered Qty in Unit**  **(a)** | **Currency: USD** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Unit price FCA Port of origin (b)** | **Total price FCA Port of origin C=(a)x(b)** | **Unit Price CPT - Air/Sea Port**  **(d)** | **Total Price CPT - Air/Sea Port**  **e=(a)x(d)** |
| 1 | 1 | Automatic pipette 20-200 microlitre | Pcs | each | 5 |  |  |  |  |  |  |  |
| 2 | Automatic pipette 100-1000 microlitre | Pcs | each | 5 |  |  |  |  |  |  |  |
| 3 | Electronic automatic pipette aid, battery capacity for 8 hours | each | Pcs | 2 |  |  |  |  |  |  |  |
| 2 | 1 | Filter Tips sterile 1 to 200 µl | Box | Box/ 960 t. | 50 |  |  |  |  |  |  |  |

Payment terms 30 days accepted: ☐ Yes



\* UNOPS is exempted from Taxes and Duties. The offer shall be submitted net of any direct taxes, customs duties and indirect taxes, such as sales taxes, VAT, etc

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

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

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

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

**Form C: Technical Quotation Form**

E-sourcing references no: **Supply of Laboratory consumables to Cambodia –RFQ/2023/48302**

Name of Bidder: [insert name of bidder]

Bidders are required to complete the **Comparative Data Tables** included below 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 Comparative Data Table**

**NOTE: The below specifications on sizes and different ranges required are only approximate and the bidder can offer a product with some variations as long as the product offered provides the same or superior level of performance.**

Standards for workmanship, process, material, and equipment, as well as references to brand names or catalogue numbers, if any, specified by the Purchaser in the Schedule of Requirements, are intended to be descriptive only and not restrictive.

The Bidder may offer other standards of quality, brand names, and/or catalogue numbers, provided that it demonstrates, to the Purchaser’s satisfaction, that the products offered ensure substantial equivalence or are superior in performance to those specified in the Schedule of Requirements.

| **Lot No.** | **Item No.** | **Item Description** | **UNOPS Minimum Requirements** | **Is quotation compliant? Bidder to complete** | **Details of goods offered / Bidder to complete** |
| --- | --- | --- | --- | --- | --- |
| 1 | 1 | Automatic pipette 20-200 microlitre | Product Catalogue No, Brand, Manufacturer Name | ☐ Yes ☐ No | Product Catalogue No, Brand, Manufacturer Name offered if applicable |
| * Single channel microlitre pipette * fully autoclavable (121 degree C); * UV-resistant material. * Adjustable volume range of 20-200 µl; at least 0.5 µl fine adjustment Very high accuracy and precision. * Three defined stops (take up from the first stop, dispensing and blow out, tip ejection); easy and safe tip ejection mechanism. * Fixation of adjusted volume. slim pipette shaft. cone for standard tips. | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| * The manufacturer must have a management system certified to ISO 9001. * One certificate to state that the pipette has been calibrated at the factory. Quality and safety standards met by the product must be listed. * At least one set of operation, maintenance and service manual for each microlitre pipette, written in English language. * All standard accessories, consumables and parts required to operate the equipment, including all standard tools and cleaning and lubrication material, to be included n the offer. * A maintenance kit, with full documentation and tools for in-laboratory calibration according to ISO9000. * Spare parts. Gaskets. Lubricants. * Two years warranty. | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| Product Catalogue including detail information | ☐ Yes ☐ No | Product Catalogue |
|  | 2 | Automatic pipette 100-1000 microlitre | Product Catalogue No, Brand, Manufacturer Name | ☐ Yes ☐ No | Product Catalogue No, Brand, Manufacturer Name offered if applicable |
| * single channel microlitre pipette, * fully autoclavable (121 degree C); * UV-resistant material. * Adjustable volume range of 100-1000 µl; at least 0.5 µl fine adjustment). * Very high accuracy and precision. * Three defined stops (take up from the first stop, dispensing and blow out, tip ejection); * easy and safe tip ejection mechanism. * Fixation of adjusted volume. slim pipette shaft. cone for standard tips. | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| * The manufacturer must have a management system certified to ISO 9001 * One certificate to state that the pipette has been calibrated at the factory. * Quality and safety standards met by the product must be listed. * At least one set of operation, maintenance and service manual for each microlitre pipette, written in English language. * All standard accessories, consumables and parts required to operate the equipment, including all standard tools and cleaning and lubrication material, to be included in the offer. * A maintenance kit, with full documentation and tools for in-laboratory calibration according to ISO9000. * Spare parts. Gaskets. Lubricants. * Two years warranty. | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| Product Catalogue including detail information | ☐ Yes ☐ No | Product Catalogue |
|  | 3 | Electronic automatic pipette aid, battery capacity for 8 hours | Product Catalogue No, Brand, Manufacturer Name | ☐ Yes ☐ No | Product Catalogue No, Brand, Manufacturer Name offered if applicable |
| Weight below 200 g;  Battery 2x 1.2V AAA NiMH, removable, 8-hour operation, rechargeable during use,  discharged & charging light;  Autoclavability Nose piece,  Silicone pipette mount & filter rubber;  Filter Replaceable, 0.45µm or 0.20µm standard & sterile;  Pipette types plastic from 1mL to 100mL;  Power supply 100-240V / 50-60Hz/ EU, US, UK, JAP or AUS plug version; | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| Certification CE, EMC, RoHS, WEEE | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| Product Catalogue including detail information | ☐ Yes ☐ No | Product Catalogue |
| 2 | 1 | Filter Tips sterile 1 to 200 µl | Product Catalogue No, Brand, Manufacturer Name | ☐ Yes ☐ No | Product Catalogue No, Brand, Manufacturer Name offered if applicable |
| Filter Tips sterile 1 to 200µl  (Compatible for Eppendorf pipette) | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/catalogue no offered if applicable |
| Product Catalogue including detail information | ☐ Yes ☐ No | Product Catalogue |

**Quality Assurance Requirements and Other requirements**

| **Quality Assurance Requirements** | **Is quotation Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| --- | --- | --- |
| For all items  The offered products shall be manufactured at a site compliant with all applicable requirements of the ISO 13485/ISO9001 series or an equivalent Quality Management System recognized by one of Regulatory authorities of the founding members of GPHF.  Under Lot 1  Item 1 & 2   * One certificate to state that the pipette has been calibrated at the factory. Quality and safety standards met by the product must be listed.   Item 3   * Certification CE, EMC, RoHS, WEEE   Bidders shall enclose the copies of certification for the offered product along with the submission. | ☐ Yes ☐ No  Please provide the valid and relevant document |  |
| **UNOPS QA:**  The product shall comply with UNOPS QA policy as applicable as can be seen at the link:  <https://content.unops.org/service-Line-Documents/Procurement/UNOPS-Procurement-Manual-Annex-2-2021_EN.pdf> | ☐ Yes ☐ No |  |
| **Product Specification:**  Bidder shall indicate the offer product name, catalogue number, product photos and related product information. | ☐ Yes ☐ No  Please provide the valid and relevant document |  |
| **Packaging and Labelling Specifications** | **Is quotation Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| ● Manufacturer’s standard packing.  ● All labelling and packaging inserts shall be in English.  ● Goods requiring refrigeration or freezing or those that should not fall below a certain minimum temperature for stability must specifically indicate storage requirements on labels and containers and be shipped in special containers to ensure stability in transit from point of shipment to port of entry.  ● The final cartons should be shrink-wrapped in a clear plastic which prevents the product during transportation, storage and rough handling keeping in view the heavy rains in Cambodia.  ● The outer case or carton should also display the following information:  ➢ Carton numbering e.g. carton 1/40  ➢ UNOPS Logo  ➢ Shipping Marks  ➢ Date of manufacture and expiry  ➢ Batch number  ➢ Special instructions for storage | ☐ Yes ☐ No |  |
| **Shelf Life (If applicable)** | **Is quotation Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| **For the applicable shelf life products**  If the product have shelflife, it shall have a minimum of 80 % of remaining shelf life or more than 2 or 3 years on arrival at Port of Entry Phnom Penh, Cambodia  The supplier shall indicate the manufacturing and expiry date on outer packaging. | ☐ Yes ☐ No |  |
| **Defect** | **Is quotation Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| 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 batch at its own cost. | ☐ Yes ☐ No |  |
| **Complaint** | **Is quotation Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| Any complaint from UNOPS or its end user will be handled by the Supplier according to its internal standard operating procedures, and pursuant to the provisions relating to provisions as set out in the General Conditions. | ☐ Yes ☐ No |  |
| **Recall** | **Is quotation Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| If, after delivery, a batch has to be recalled, for whatever reason, the Supplier will inform UNOPS immediately. The Supplier will replace, at its own cost, all items covered by the recall with goods that fully meet the requirements of the original Purchase Order, and arrange for the collection or destruction of any defective goods. | ☐ Yes ☐ No |  |

**Form D: Delivery Requirement Form**

**Delivery requirements –– Comparative Data Table**

**E sourcing Ref: Supply of Laboratory Consumables to Cambodia – RFQ/2023/**48302

| **UNOPS Requirements** | | **Compliant?**  **Bidder to complete** | **If No, Provide comments** |
| --- | --- | --- | --- |
| **Delivery Schedule** | 100% quantity to be delivered within 60 days after contract signing. | ☐ Yes ☐ No |  |
| **Delivery place and Incoterms rules** | CPT- Port of Entry Phnom Penh, Cambodia ( Incoterm - 2020 )  Cargo Insurance will be arranged by UNOPS. Custom clearance to be done by UNOPS.  The supplier shall provide AWB/BOL and other shipping documents in advance to UNOPS. UNOPS will apply for a Tax exemption certificate (TEC). Once the TEC is received, UNOPS will provide the greenlight for the shipment | ☐ Yes ☐ No |  |
| **Mode of Transport** | Air/Sea Freight ( Bidder need to provide the offer mode of transport in Comment column) | ☐ Yes ☐ No |  |
| **Submission of Shipping Documents** | When the goods are ready for dispatch, it is advisable that the supplier submit the DRAFT shipping documents in advance to UNOPS for applying Tax Exemption. Supplier shall not ship the goods till Tax Exemption Certificate (TEC) is received and UNOPS has provided clearance to ship the Goods.  **Submission of FINAL shipping documents:**  After the receipt of TEC, as informed by UNOPS, the supplier shall immediately submit all the final shipping documents to UNOPS for customs clearance.  Note : Since the items Lot 1 & 2 are under the different projects,the supplier must provide the separate shipping arrangement for these projects with a separate invoice, packing list, and Bill of Lading for custom clearance by respective consignee incase of an award.  **Split Invoice, Packing list & Split Way Bill**   * Lot 1 * Lot 2 | ☐ Yes ☐ No |  |
| **Consignee Details** | **For Lot 1**  National Center for Tuberculosis and Leprosy Control - CENAT, Ministry of Health,  St. 278/95, Sangkat Beung Keng Kang II, Khan Beung Keng Kang, Phnom Penh Cambodia | ☐ Yes ☐ No |  |
| **For Lot 2**  National Center of HIV/AIDS Dermatology and STDs, Ministry of Health, Phnom Penh #245 H, Phum Kean Kiang, SangkalPrek Leap, Khan ChhroyChangva, Phnom Penh, Cambodia |  |  |
| **UNOPS Right to vary requirements** | At the time the Contract is awarded, UNOPS reserves the right to vary the quantity of the goods 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 |  |

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: One UNOPS Supplier Profile Form**

**(**To be submitted if the bidder has not been supplied to UNOPS before.)

| **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** | | | | | |

| **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** | | |