

SECTION III: CONDITIONS OF CONTRACT

INSTRUMENT OF AGREEMENT

- Long Term Agreement
- Consultant Services Contract for Works- Instrument-of-Agreement
- Call of Order

GENERAL CONDITIONS OF CONTRACT

- [Consultant Services Contract for Works: General Conditions of Contract](#)

PARTICULAR CONDITIONS OF CONTRACT

Part 1: Amended Clauses

The General Conditions are amended in the following manner (if nothing is stated, then no amended conditions apply):

No.	Clause/Sub-Clause No. and Title	Amended General Condition
1	-	-
2		
3		
4		
5		

Part 2: Additional Clauses

The General Conditions are supplemented by the inclusion of the following additional conditions (if nothing is stated, then no additional conditions apply):

No.	Clause/Sub-Clause No. and Title	Additional General Condition
1	-	-
2		
3		
4		
5		

SECTION IV: SCHEDULE OF DETAILS

SCHEDULE 1: CONTRACT DETAILS

1.1 Details Provided by the Employer

(NOT USED) Information will be Provided at Call-Off Order Level

Sub-Clause No.	Description	Details
1.1	Country	Name: <input type="text"/> <input type="text"/>
1.4.1	Agreed system of electronic transmission	<input type="checkbox"/> Email: <input type="text"/> <input type="text"/> <input type="checkbox"/> If others, specify: <input type="text"/> <input type="text"/>
1.4.1	Employer's Address for Communication	Name: <input type="text"/> <input type="text"/> Position title: <input type="text"/> <input type="text"/> Address: <input type="text"/> <input type="text"/> Email address: <input type="text"/> <input type="text"/> Telephone/Mobile number: <input type="text"/> <input type="text"/>
2.2	Employer's Representative	Name: <input type="text"/> <input type="text"/>

		Address: <input type="text"/> <input type="text"/>
		Email Address: <input type="text"/> <input type="text"/>
		Telephone/Mobile number: <input type="text"/> <input type="text"/>
3.2.1	Performance Security Amount	<input type="checkbox"/> <input type="text"/> % of the Accepted Contract Amount <input type="checkbox"/> Not applicable
3.2	Permitted Guarantors for Performance Security	<input type="checkbox"/> Bank or financial institutions approved by the Employer <input type="checkbox"/> Bank approved by Employer
4.2.1	Commencement Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
4.2.4	Liability Period	<input type="text"/> Years
4.3.1	Time for Completion	<input type="text"/> months/ <input type="text"/> days
4.4.5	Delay Damages	<input type="checkbox"/> Amount per day: <input type="text"/> USD <input type="checkbox"/> <input type="text"/> % of the Accepted Contract Amount per day
4.4.6	Aggregate maximum amount of Delay Damages	<input type="text"/> % of the Accepted Contract Amount
7.2.2	Annual rate of financing charges for delayed payment	<input type="text"/> %
7.3	Currencies of Payment	Currency 1: <input type="text"/> Currency 2: <input type="text"/>
7.3	Proportions of Currencies	Currency 1: <input type="text"/> Currency 2: <input type="text"/>
7.8.2	Advance Payment Amount	<input type="checkbox"/> <input type="text"/> % of the Accepted Contract Amount <input type="checkbox"/> <input type="text"/> USD <input type="checkbox"/> Not applicable

7.8.3	Permitted Guarantors	<input type="checkbox"/> Bank or financial institution(s) approved by the Employer <input type="checkbox"/> Bank approved by Employer
7.8.6	Advance repayment amount	<input type="checkbox"/> <input type="text"/> % of the value of Services completed <input type="checkbox"/> Not applicable
8.4.1	Limit of Liability	<input type="text"/> USD

ATTENTION: DO NOT COMPLETE THIS PAGE

The table 1.2 must be left blank. The offer risks being invalidated if any information is included.

1.2 Details Provided by the Consultant¹

Sub-Clause No.	Description	Details
1.1	Accepted Contract Amount	Amount in words: <input type="text"/> Amount in figures: <input type="text"/>
1.3	Consultant's address for communication	Name: <input type="text"/> Position title: <input type="text"/> Address: <input type="text"/> Email Address: <input type="text"/> Telephone/Mobile number: <input type="text"/>
4.3	Consultant's Representative	Name: <input type="text"/> Position title: <input type="text"/> Address: <input type="text"/> Email Address: <input type="text"/> Telephone/Mobile number: <input type="text"/>

¹ For the purposes of this RFP, when the term "Consultant" is used, it refers to the offeror. The Schedules, submitted by the offeror whose proposal is selected after evaluation and who is awarded the Contract, will be included in the Contract.

SCHEDULE 2: PROJECT SPECIFIC INFORMATION

(NOT USED)

Project Specific Information will be provided at Call-Off Order level.

SCHEDULE 5: FORMS

5.1 Form for Advance Payment Security (Not Used)

5.2 Form for Performance Security (Not Used)