

REQUEST FOR PROPOSALS

Supply of 680 units of patient vital signs monitor for adult, infants and neonatal patients; and 780 units of electronic syringe pump to strengthen the hospital's capacity in prevention, control and treatment infectious diseases, including COVID-19 in Viet Nam

INTRODUCTION:

Globally, as of 19 July 2023, there have been 768,237,788 confirmed cases of COVID-19, including 6,951,677 deaths, reported to WHO. In addition to the fact that the virus is still unpredictable and has re-emerged in some countries, variants like Omicron subvariants BA.4, BA.5, and BA.2 are believed to be more contagious than the original strains.

Vietnam has experienced multiple COVID-19 outbreaks since the start of 2020. By July 2023, there had been 11,621,347 confirmed cases of COVID-19 with 43,206 deaths. Thanks to vaccination efforts, COVID-19 has been well controlled in Vietnam. However, in August 2022, there were signs of a resurgence. Domestically, sub-variants such as BA.4, BA.5, BA.2.74, and BA.2.12.1 have been detected. Some regions still have low vaccination rates for the third and fourth doses, as well as low vaccine coverage for children. It posed a threat to the healthcare system as the number of cases begins to rise again. The COVID-19 pandemic has revealed the weakness of Vietnam's healthcare system, including shortages of medical equipment and supplies at both national and local levels. Many hospitals are currently facing a scarcity of vital resources, particularly those essential for diagnosing and treating infectious diseases and COVID-19.

To address this issue, UNICEF Vietnam intends to engage **a qualified local-based supplier** to procure and deliver medical equipment to hospitals in Vietnam. The products are: 680 units of patient vital signs monitor for adult, infants and neonatal patients; and 780 units of electronic syringe pump. The support aims to improve the healthcare facilities' capacity for examination, diagnosis, and treatment of various diseases, including COVID-19. It will be especially valuable in the event of a sudden surge in the number of patients requiring medical attention at these hospitals and healthcare facilities.

I. SCOPE OF WORK & ESTIMATED TIME

1. Scope of work

- The Bidder shall supply, install, and hand over the medical equipment to provincial DOHs (see **Annex 4-Tentative Distribution List**), subject to further discussion with UNICEF on possible change in the final destinations.
- The Bidder shall provide a commissioning manual and make a trial run when handing over the medical equipment.
- The Bidder shall provide a complete list of medical equipment. For each type of equipment, it is necessary to specify the manufacturer, origin, brand, model, and serial number.
- The Bidder shall provide detailed warranty coverage information, a list of service centres, and contact information for any service/maintenance requirements.
- The Bidder shall be responsible for periodic maintenance and failure of the medical equipment during the warranty period.
- The Bidder shall appoint an authorized person to coordinate with relevant officials of the Ministry of Health, the provincial Dept. of health and hospitals, and UNICEF to implement and complete the works.

2. Estimated handover date:

All medical equipment and accessories shall be handed over to the recipients **before 22 March 2024**.

II. General requirements

1. The Bidder could be an Importer or a Distributor who has an office in Viet Nam and is certified for ISO 9001 Quality management system.

2. **Products and brands:** Internationally recognized brands and products with at least 03 (three) years of establishment and business operations in Viet Nam.

3. **Product quality:**

- Products must be new, with tags intact, and manufactured in 2022 onwards.
- Products' Declarations of Conformity include the standards as:

○ Patient monitor	IEC 60601-1	○ Syringe pump:	IEC 60601-1
	IEC 60601-1-2		IEC 60601-1-2
	IEC 80601-2-49		IEC 60601-2-24
	IEC 80601-2-30		IEC 62304
	IEC 80601-2-61		EN ISO 15223-1
	IEC 80601-2-56		
	IEC 62304		
	EN ISO 15223-1		

- Priority shall be given to eco-friendly and energy-efficient products.

4. **Origin of the products**

- Marketing authorization (MA) license for circulating on the market in Viet Nam
- Certificate of Origin (original or notarized copy)
- Proof of market clearance in one of the below listed markets:
 - ❖ Australia: TGA Device License
 - ❖ Canada: Device License
 - ❖ European Union: European medical device (MDD 93/42/EEC or MDR 2017/745) CE Mark
 - ❖ Japan: Device License
- USA - FDA 510(k) premarket Notification Clearance, or Premarket Approval (PMA), or Human Device Exception Approval (HDE).
- Import documentation

5. **Warranty (as of the handover date):** Minimum 24-month warranty with a Warranty Card and a list of service centres.

6. **Installation and user training:** The Bidder shall deliver, install, and provide guidance through a trial run for the user's technical proficiency, specify and separate trainings for health professionals and biomedics for maintenance purposes.

7. **User Manual:** The Bidder shall provide a maintenance and operation manual in Vietnamese and English for each product.

8. **Other requirements:**

- Power adapter supply for Vietnam's electricity voltage 100 - 240 Volts - 50/60 Hz.
- Operating environment: in accordance with the standards and conditions in Viet Nam

III. TECHNICAL SPECIFICATIONS & REQUIREMENTS

A. PATIENT VITAL SIGNS MONITOR

Patient vital signs monitor, 6 parameters, suitable for adults, paediatric/infants and newborn patients.

1. **Specifications:**

- Monitoring 6-parameters: ECG and Heart Rate (HR), Respiratory Rate (RR), SpO₂, non-invasive blood pressure, and Temperature
- Adjustable signal amplitude and sensitivity.
- Colour flat panel display ≥ 10.4 inches.
- Multi-waveform and parameters visualization, up to 7 wave forms simultaneously.
- Ability to remove unwanted parameters from display.
- Defibrillator sync and protection.
- Patient information and trend internal database.
- Ability to save a minimum of 72 events.
- Trend storage ≥ 24 hours.
- Data and network interface, LAN, USB or equivalent.
- Suitable for standard bed/wall rail and pole stand mount.
- Robust design for use in a demanding environment.
- Designed for frequent and easy dismount and disinfection with hospital-grade products.
- Automatic self-test and continuous system monitoring.
- Built-in rechargeable battery, autonomy of at least 2 hours.
- Automatic switch to battery in case of power failure, automatic recharge on connection to mains.
- Ain cable at least 3 meters long.
- Electrical protection provided by fuses in both live and neutral supply lines.
- Power requirements: 100 - 240 Volts - 50/60 Hz

1.1 Electrocardiogram (ECG) and heart rate (HR)

- The ECG is derived from a minimum of 5-leads I, II, III, aVR, aVL, aVF, V.
- The unit allows for a simultaneous display of a minimum of 2 ECG traces.
- The accuracy of the HR is equal or better than ± 1 bpm or 1%.
- The resolution of the HR is equal or better than: 1 bpm.
- The unit provides for S-T analyses on ECGs.
- The unit provides for arrhythmia analysis on the ECGs.
- The unit is equipped with a standardising marker at 1 mV.
- The adult HR measurement range is equal to or better than: 15 – 300 bpm.
- The paediatrics/neonates HR measurement range is equal to or better than: 30 – 300 bpm.

1.2 Respiration rate (RR)

- The adult RR measurement range is equal to or better than: 6 – 120 bpm.
- The paediatric/neonatal RR measurement range is equal to or better than: 6 – 150 bpm.
- The resolution of the RR is equal to or better than: 1 bpm.

1.3 Non-invasive blood pressure (NIBP)

- The NIBP is measured through the oscillometric step deflation method.
- The unit supports manual and automatic modes.
- The unit allows for adjustable inflation pressure.
- The NIBP adult range in minimum diastolic and maximum systolic values should be equal or better than: 10 – 270 mmHg.
- The NIBP paediatric NIBP measurement range in minimum diastolic and maximum systolic values should be equal or better than: 10 – 200 mmHg.
- The BP neonatal measurement range in minimum diastolic and maximum systolic values should be equal or better than: 10 – 135 mmHg.
- The resolution of the NIBP is equal to or better than: 1 mmHg or better.

- The minimum average error for the NIBP is: ± 5 mmHg (0.7 kPa), Standard deviation: ≥ 8 mmHg (1.1 kPa)

1.4 Oxygen saturation (SpO₂)

- The SpO₂ measurement range is equal to or better than: 1 – 100%.
- The resolution of the SpO₂ is equal to or better than: 1% or better.
- The accuracy of the SpO₂ is equal to or better than: $\pm 3\%$ between 70% - 100%.
- The HR detection range derived from the SpO₂ is equal to or better than: 25 – 250 bpm.
- The accuracy of the HR detection is equal to or better than: ± 2 bpm or $\pm 2\%$, whichever is greater (static).

1.5 Temperature (T)

- The temperature measurement range is equal to or better than: 0 - 50°C.
- The temperature resolution is equal to or better than: 0.1°C or better.
- The temperature accuracy is equal to or better than: $\pm 0.1^\circ\text{C}$.

1.6 Alarm functionalities

- The unit provide audio-visual alarms for all monitored parameters
- The unit allows for user pre-set of high and low alarms for all monitored parameters for each different patient category.
- The alarm has override and temporary silence functions.
- The unit generates alarms for leads-off or sensor disconnect or sensor failure.
- The unit is provided with an apnoea alarm.
- The unit is equipped with an alarm for AC status and low battery

2. Supplied with

- Instructions for assembly, use and maintenance in Vietnamese and English
- 1 x Plastic protective dust cover.
- 1 x wall mount bracket.
- 1 x spare rechargeable battery pack.
- 1 x set of spare fuses, if required.
- NIBP accessories:
 - 3 x NIBP hoses (1 x neonatal, 1 x paediatric, 1 x adult).
 - 3 x blood pressure cuffs (1 x neonatal, 1 x paediatric, 1 x adult).
- ECG accessories:
 - 2 x sets of patient cable terminals (1 x neonatal/paediatric, 1 x adult).
 - 2 x sets of electrodes (1 x neonatal/paediatric, 1 x adult).
- Temperature sensors:
 - 2 x skin temperature probes including cable.
- SpO₂ transducers, including connection cable:
 - 2 x adult size, reusable clip-on type.
 - 2 x paediatric size, reusable clip-on type.
 - 3 x neonatal size, reusable clip-on type.
 - 10 x neonatal size, single-use, wrap-around type.

3. Other requirements:

- Installation: Assembly and commissioning this product should be carried out by qualified technicians.

- Training: User training prior to utilization is recommended, specify and separate trainings for health professionals and biomedics for maintenance purposes.
- Quality management system:
 - Manufacturer is certified for ISO 13485 Medical devices - Quality management systems - Requirements for regulatory purposes.
 - Supplier is certified for ISO 9001 Quality management systems – Requirements.

B. ELECTRONIC SYRINGE PUMP

Volume controlled portable syringe pump for precise administration of fluids

1. Specifications:

- Open system, compatible with all standard brands of syringes.
- A lockable keyboard feature that prevents unauthorized operation of the device
- Compatible with 10, 20, 30 and 50mL capacity syringes at a minimum.
- Continuous delivery, linear motor and plunger driven.
- The unit is equipped with occlusion detection.
- Self-test is performed each time the device is switched on.
- User programmable for syringe size, infusion volume, time, and flow rate.
- Automatic calculation of third parameter when user enters in other two (volume, time, and flow rate).
- Minimum guaranteed flow rate of 0.1-1300mL/hr, depending on syringe size.
- Minimum Keep Vein Open (KVO) rate of 0.1-1mL/hr but never greater than programmed flow rate.
- Volume delivered with an accuracy of at least 3%.
- Maximum pressure of at least 17.4 PSI / 120 kPa.
- User adjustable high pressure/occlusion settings.
- Display includes start/stop, volume limit, flow rate and volume so far delivered.
- System reports with audio-visual alert on operational status such as, but not limited to ready, end-of-injection.
- System reports with audio-visual alert on malfunctions such as, but not limited to syringe position, occlusion, low/high flow.
- System reports with audio-visual alert on low battery status.
- Ability to silence audio alarms for maximum of 2 minutes.
- Built in battery with a capacity to run the unit for 7 hours at 5mL/hr flow rate.
- Automatic switch from mains to battery in case of power failure.
- Automatic battery charge when mains connection is re-established.
- Capable of being mounted on mobile pole/(roll) stand, bed rail and wall-mounted rails.
- Designed for frequent and easy dismount and disinfection with hospital-grade products.
- Power requirements: 100 - 240 Volts - 50/60 Hz.

2. Supplied with

- Instructions for assembly, use and maintenance in English and Vietnamese
- 1 x Spare battery pack.
- 1 x Mounting bracket for fixation to standard bed/wall rail and mobile pole/stand.
- 1 x Set of spare fuses, if applicable.

3. Other requirements:

- Installation: Assembly and commissioning this product should be carried out by qualified technicians.
- Training: User training prior to utilization is recommended.
- Quality management system:
 - Manufacturer is certified for ISO 13485 Medical devices - Quality management systems - Requirements for regulatory purposes.
 - Supplier is certified for ISO 9001 Quality management systems – Requirements.

IV. TECHNICAL PROPOSAL

Add/Attach the following documents to the Technical Proposal:

1. Business Registration Certificate;
2. The financial statements for the last two years (2021-2022) in English with notarization and in Vietnamese (with signature and seal);
3. Supplier profile form (attached to **Annex 3**);
4. Authorization letter/ confirmation letter from the manufacturer;
5. Certificates of work experience with UN agencies or similar clients/ contracts (if any).
6. Related certificates/brochures/data outlining the general requirements in part III for offered machines.
7. The technical proposal shall succinctly outline how the supplier implements and manages the project to meet the estimated delivery date (details of offered machines, project personnel and shipping methods).
8. A Vendor Compliance Matrix (**Annex 1**) for the supplier to fill and sign.
9. Photos and documents (in Vietnamese) of proposed medical equipment.

V. FINANCIAL PROPOSAL

1. The quotation shall be in Vietnamese Dong (VND) **excluding any taxes as UNICEF is a tax-exempt organization.**
2. Unit price for each equipment includes all the services mentioned in the section “Scope of work” for that equipment offered separately.
3. Required financial statement of the recent two years (2021-2022)
4. The technical proposal and financial proposal must be submitted separately.

VI. EVALUATION PROCESS AND METHODS

Both the Technical proposal and financial proposal must **have letterheads, signature, title and seal of the Bidder and be saved in pdf format.**

Proposal submission deadline: 24:00hrs, 30 November 2023, Ha Noi time.

Documents submitted after the above deadline shall be rejected.

Proposal evaluation shall be based on the following criteria:

1. Technical evaluation criteria (60 points maximum)

Criteria		Point
1	Meet all the general requirements	15
2	Meet all the technical specifications	30

3	Meet all other requirements (especially eco-friendly and energy saving criteria)	5
4	Delivery time	10
	Total	60

2. Financial evaluation criteria (40 points maximum)

Criteria	Point
1 Good quality with a favourable price	25
2 All essential accessories and delivery costs are included	10
3 Additional incentives for the user	5
Total	40

The maximum point for technical and financial criteria is 60 and 40 respectively, and the total maximum point is 100. Only bidders with a technical proposal getting at least 50 points shall be evaluated for their financial proposal.

The proposal with the highest point from adding points of the technical proposal and the financial proposal shall be the most cost-effective one and be recommended for contract award.

VII. TERMS OF PAYMENT

- The payment shall be divided into **three instalments**:
 - First payment: Advance of 5% of the total contract value after signing the contract, upon receipt of the valid invoice and bank guarantee (please refer to **Annex 2-Bank Guarantee**);
 - Second payment: 50% of the total contract value within 30 days upon receipt of the valid invoice and completion of the delivery of 50% equipment with goods receipts signed and sealed by the recipients;
 - Third payment: 45% of the total contract value within 30 days upon receipt of the valid invoice and completion of the delivery of the rest equipment with goods receipt signed and sealed by the recipients.
- The supplier must present **a Bank Guarantee in the format attached as Annex 2** to receive the advance of 5% of the total contract value.
- UNICEF shall reserve the right to withhold all or part of the payment amount if the performance is not satisfied, or if the equipment is incomplete or delivered, or if the supplier fails to meet deadlines.

VIII. PROJECT MANAGEMENT

The Head of Child Survival, Development and Environment (CSDE) shall be responsible for overall management; Maternal and Child Health Specialists and the COVID-19 immunization coordinators shall be responsible for daily management.

LIST OF ANNEXES

ANNEX 1: Vendor Compliance Matrix

ANNEX 2: Bank Guarantee

ANNEX 3: Supplier Profile Form

ANNEX 4: Tentative Distribution List

Women-owned companies are encouraged to bid. Preference will be given to equally technically qualified women-owned companies.

ANNEX 1: VENDOR COMPLIANCE MATRIX

Suppliers are required to describe their ability to meet the requirements mentioned in Section III - TECHNICAL SPECIFICATIONS AND REQUIREMENTS of the bidding documents with attached documents including information of section, page number and line number proving it.

NO.	Requirements	Meet all the requirements	Meet part of the requirements	Note
General requirements				
	Certified for ISO 9001 Quality management system.			
	Products and brands			
	Product quality			
	Origin of the products			
	Warranty			
	Installation and user trainings			
	User manuals			
	Other requirements			
A. PATIENT VITAL SIGNS MONITOR				
Specifications				
General requirements				
	Patient vital signs monitor, 6 parameters, suitable for adults, paediatric/infants and newborn patients.			
	Monitoring 6-parameters			
	Adjustable signal amplitude and sensitivity			
	Colour flat panel display ≥ 10.4 inches.			
	Multi-waveform and parameters visualization, up to 7 wave forms simultaneously			
	Ability to remove unwanted parameters from display			
	Defibrillator sync and protection			
	Patient information and trend internal database			
	Ability to save a minimum of 72 events			
	Trend storage ≥ 24 hours			
	Data and network interface, LAN, USB or equivalent			
	Suitable for standard bed/wall rail and pole stand mount			
	Robust design for use in demanding environment			
	Designed for frequent and easy dismount and disinfection with hospital-grade products			
	Automatic self-test and continuous system monitoring			
	Built-in rechargeable battery, autonomy of at least 2 hours			
	Automatic switch to battery in case of power failure, automatic recharge on connection to mains			
	Ain cable at least 3 meter long			
	Electrical protection provided by fuses in both live and neutral supply lines			
	Power requirements: 100 - 240 Volts - 50/60 Hz			
1.1 Electrocardiogram (ECG) and heart rate (HR)				
	The ECG is derived from a minimum of 5-leads I, II, III, aVR, aVL, aVF, V.			
	The unit allows for a simultaneously display of a minimum of 2 ECG traces.			

	The accuracy of the HR is equal or better than ± 1 bpm or 1%.			
	The resolution of the HR is equal or better than: 1 bpm.			
	The unit provides for S-T analyses on ECGs.			
	The unit provide for arrhythmia analysis on the ECGs.			
	The unit is equipped with a standardising marker at 1 mV.			
	The adult HR measurement range is equal to or better than: 15 – 300 bpm.			
	The paediatrics/neonates HR measurement range is equal to or better than: 30 – 300 bpm.			
	1.2 Respiration rate (RR)			
	The adult RR measurement range is equal to or better than: 6 – 120 bpm.			
	The paediatric/neonatal RR measurement range is equal to or better than: 6 – 150 bpm.			
	The resolution of the RR is equal to or better then: 1 bpm.			
	1.3 Non-invasive blood pressure (NIBP)			
	The NIBP is measured through the oscillometric step deflation method.			
	The unit supports manual and automatic modes.			
	The unit allows for adjustable inflation pressure.			
	The NIBP adult range in minimum diastolic and maximum systolic values should be equal or better than: 10 – 270 mmHg.			
	The NIBP paediatric NIBP measurement range in minimum diastolic and maximum systolic values should be equal or better than: 10 – 200 mmHg.			
	The BP neonatal measurement range in minimum diastolic and maximum systolic values should be equal or better than: 10 – 135 mmHg.			
	The resolution of the NIBP is equal to or better than: 1 mmHg or better.			
	The minimum average error for the NIBP is: ± 5 mmHg (0.7 kPa), Standard deviation: ≥ 8 mmHg (1.1 kPa)			
	1.4 Oxygen saturation (SpO₂)			
	The SpO ₂ measurement range is equal to or better than: 1 – 100%.			
	The resolution of the SpO ₂ is equal to or better than: 1% or better.			
	The accuracy of the SpO ₂ is equal to or better than: $\pm 3\%$ between 70% - 100%.			
	The HR detection range derived from the SpO ₂ is equal to or better than: 25 – 250 bpm.			
	The accuracy of the HR detection is equal to or better than: ± 2 bpm or $\pm 2\%$, whichever is greater (static).			
	1.5 Temperature (T)			
	The temperature measurement range is equal to or better than: 0 - 50°C.			
	The temperature resolution is equal to or better than: 0.1°C or better.			
	The temperature accuracy is equal to or better than: ± 0.1 °C.			
	1.6 Alarm functionalities			

	The unit provide audio-visual alarms for all monitored parameters			
	The unit allows for user pre-set of high and low alarms for all monitored parameters for each different patient category.			
	The alarm has override and temporary silence functions.			
	The unit generates alarms for leads-off or sensor disconnect or sensor failure.			
	The unit is provided with an apnoea alarm.			
	The unit is equipped with an alarm for AC status and low battery			
Supplied with				
	Instructions for assembly, use and maintenance in English and Vietnamese			
	1 x Plastic protective dustcover.			
	1 x wall mount bracket.			
	1 x spare rechargeable battery pack.			
	1 x set of spare fuses, if required.			
	NIBP accessories:			
	3 x NIBP hoses (1 x neonatal, 1 x paediatric, 1 x adult).			
	3 x blood pressure cuffs (1 x neonatal, 1 x paediatric, 1 x adult).			
	ECG accessories:			
	2 x sets of patient cable terminals (1 x neonatal/paediatric, 1 x adult).			
	2 x sets of electrodes (1 x neonatal/paediatric, 1 x adult).			
	Temperature sensors:			
	2 x skin temperature probes including cable.			
	SpO ₂ transducers, including connection cable:			
	2 x adult size, reusable clip-on type.			
	2 x paediatric size, reusable clip-on type.			
	3 x neonatal size, reusable clip-on type.			
	10 x neonatal size, single-use, wrap-around type.			
Other requirements				
	Installation			
	Training			
	Quality management system			
B. ELECTRONIC SYRINGE PUMP				
Specifications				
	Open system, compatible with all standard brands of syringes.			
	A lockable keyboard feature that prevents unauthorized operation of the device			
	Compatible with 10, 20, 30 and 50mL capacity syringes at a minimum.			
	Continuous delivery, linear motor and plunger driven.			
	The unit is equipped with occlusion detection.			

	Self-test is performed each time the device is switched on.			
	User programmable for syringe size, infusion volume, time, and flow rate.			
	Automatic calculation of third parameter when user enters in other two (volume, time, and flow rate).			
	Minimum guaranteed flow rate of 0.1-1300mL/hr, depending on syringe size.			
	Minimum Keep Vein Open (KVO) rate of 0.1-1mL/hr but never greater than programmed flow rate.			
	Volume delivered with an accuracy of at least 3%.			
	Maximum pressure of at least 17.4 PSI / 120 kPa.			
	User adjustable high pressure/occlusion settings.			
	Display includes start/stop, volume limit, flow rate and volume so far delivered.			
	System reports with audio-visual alert on operational status such as, but not limited to ready, end-of-injection.			
	System reports with audio-visual alert on malfunctions such as, but not limited to syringe position, occlusion, low/high flow.			
	System reports with audio-visual alert on low battery status.			
	Ability to silence audio alarms for maximum of 2 minutes.			
	Built in battery with a capacity to run the unit for 7 hours at 5mL/hr flow rate.			
	Automatic switch from mains to battery in case of power failure.			
	Automatic battery charge when mains connection is re-established.			
	Capable of being mounted on mobile pole/(roll) stand, bed rail and wall-mounted rails.			
	Designed for frequent and easy dismount and disinfection with hospital-grade products.			
	Power requirements: 100 - 240 Volts - 50/60 Hz			
Supplied with				
	Instructions for assembly, use and maintenance in English and Vietnamese			
	1 x Spare battery pack.			
	1 x Mounting bracket for fixation to standard bed/wall rail and mobile pole/stand.			
	1 x Set of spare fuses, if applicable.			
Other requirements				
	Installation			
	Training			
	Quality management system			

ANNEX 2: BANK GUARANTEE

BANK GUARANTEE

To: _____

This Guarantee is made on [date] by [Name of Bank] whose registered office is at [Address of Bank] (hereinafter referred to as the "Guarantor") to the United Nations Children's Fund (hereinafter referred to as "UNICEF"), with its Headquarters at Three UN Plaza, 44th street New York, NY 10017, having its office in Viet Nam at 304 Kim Ma, Ba Dinh, Ha Noi;

WHEREAS UNICEF and _____ (insert name of Contractor) whose registered office is at _____ (Insert address of Contractor) entered into an Agreement dated _____, Agreement No. _____, for the performance of _____ (insert short description of the services to be performed) (hereinafter referred to as the "Agreement");

WHEREAS under the terms of the Agreement, Contractor has covenanted to obtain a Bank Guarantee in respect of its obligations thereunder in favour of UNICEF;

AND WHEREAS we have agreed to give the Contractor such a Bank Guarantee;

NOW THEREFORE we hereby affirm that we are the Guarantor and responsible to you on behalf of the Contractor up to a total of _____ [amount of guarantee] _____ [in words], such sum being payable, and we undertake to pay you, upon your first written demand and without cavil or argument, any sum or sums within the limits of _____ [amount of guarantee] as aforesaid without your needing to prove or to show grounds for your demand for the sum specified therein.

We hereby waive the necessity of your demanding the said debt from the Contractor before presenting us with the demand. We further agree that no change or addition to or other modification of the terms of the contract or of the Works to be performed there under or of any of the Contract documents which may be made between you and _____ (insert name of Contractor) shall in any way release us from any liability under the guarantee, and we hereby waive notice of any such change, addition or modification.

This guarantee shall be valid until the date of issue of the Certificate of Substantial Completion.

No change on content or validity of this Bank Guarantee shall be undertaken by the bank without UNICEF permission.

This Guarantee is subject to URDG 758 (except that Article 15(a) is hereby excluded) to the exclusion of any single national legal system.

Any dispute, controversy or claim between the parties arising out of or relating to this Guarantee which cannot be settled amicably shall be settled by arbitration in accordance with the UNCITRAL Arbitration Rules then in force. In light of the privileges and immunities of UNICEF, references in

the UNCITRAL Arbitration Rules to the place of arbitration shall connote only the actual location for the arbitral proceedings but shall not mean the “seat” or “juridical seat” or “juridical place” for such proceeding. The arbitral tribunal shall have no authority to award punitive damages. The decision of the arbitral tribunal shall be final and binding on the parties.

The Guarantor acknowledges that nothing hereunder or in any document entered into in relation hereto shall constitute or be deemed to constitute a waiver, express or implied, of any privileges or immunities enjoyed by UNICEF.

Signature and Seal of the Guarantor_____

Name of Bank _____

Address _____

Date_____