**Section V: Returnable Bidding Forms**

**(Lot-II - *Dental X-Ray Machines and Dental Film Processors*)**

**Note to Bidders:** **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 their bid submission.**

This Section comprises the following Returnable Bidding Forms:

* Form A: Joint Venture Partner Information Form
* Form B: Bid Submission Form
* Form C: Price Submission Form
* Form D: Technical Bid Form
* Form E: Manufacturer’s Authorization Form
* Form F: Performance Statement Form

**Form A: Joint Venture Partner Information Form (Lot-II)**

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

ITB reference no: [insert ITB reference No.]

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 – (Lot-II- *Dental X-Ray Machines and Dental Film Processors*)**

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: *Re-advertisement for the Supply of Imagery Medical Equipment for Primary Hospitals in Damaturu, Yobe State, Nigeria*,** ITB Case No**. *ITB/2023/49407*,** dated **10th November 2023**

**Lot-II *Supply of Dental X-ray machines and Dental Film Processors and Related Services for General Hospitals in Jakusko and Yusufari, Yobe State, Nigeria***

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: [Insert the total bid price in words and figures, indicating the various amounts and the respective currencies];
  4. 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 [insert number of days which shall not be less than the specified in Section I: ITB Particulars, Period of Validity of Bids] 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 Section I: ITB Particulars, 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 C: Price Schedule Form (Lot-II)**

ITB reference no: [insert ITB reference No.]

Name of Bidder: [insert name of bidder]

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

**Bid Summary**

|  |  |
| --- | --- |
| **Bidder’s Total prices Bidder’s Total prices CIP Mallam Aminu Kano International Airport, Kano, Nigeria (Price of goods CIP + Related Services if applicable)** | [insert amount and currency] |
| **Bidder’s Total prices Bidder’s Total prices CIP Mallam Aminu Kano International Airport, Kano, Nigeria** | [insert amount and currency] |
| **Total Price of Related Services** | [[insert amount and currency) |

**Prices for Goods**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Item/ lot** | **Description** | **Qty**  **(a)** | **Unit** | **Currency: United States Dollars** | | | |
| **Unit Price FCA**  **(b)** | **Unit price CIP**  **(c)** | **Total price**  **FCA**  **(a)x(b)** | **Total price CIP**  **(a)x(c)** |
| **1.** | **Dental film processor (Award is OPTIONAL Based on the availability of budget – Bidder must Submit financial offer)** | **4** | Units |  |  |  |  |
| **2** | **Dental X Ray Machine** | **2** | Units |  |  |  |  |
| **Total Price of Goods** | | | | | |  |  |

1. **Prices Related services – Installation, end users training, and commissioning.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item/ lot** | **Description of the services** | **Qty** | **Units** | **Unit Price** | **Total Price** |
| **1.** | **Dental film processor (Award is OPTIONAL Based on the availability of budget – Bidder must Submit financial offer)** | **4** | Units |  |  |
| **2** | **Dental X-Ray Machine** | **2** | Units |  |  |
| **Total** | | | | |  |

**Bidder’s delivery data**

|  |  |  |
| --- | --- | --- |
| **Country of origin of offered products** | Item 1 |  |
| Item 2 |  |

|  |  |  |
| --- | --- | --- |
| **FCA point(s) of delivery for offered products** | Item 1 |  |
| Item 2 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Shipment dimensions of offered products (Including package)** |  | **Gross weight** | **Total volume** | ***Containers (if applicable)*** | |
| ***Number*** | ***Size*** |
| Item 1 |  |  |  |  |
| Item 2 |  |  |  |  |

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 D: Technical Bid Form (Lot-II)**

ITB reference no: [insert ITB reference No.]

Name of Bidder: [insert name of bidder]

Bidders are required to complete the **Comparative Data Tables** included in Section IV: 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.

1. **Technical specifications for Goods and Comparative Data Table**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item No** | **UNOPS minimum technical requirements** | **Is Bid compliant?** Bidder to complete | **Details of goods offered.** Bidder to complete |
| **1** | **Dental film processor (Award is OPTIONAL Based on the availability of budget – Bidder must Submit financial offer)** | ☐ Yes ☐ No | Insert details of goods offered, including specifications and brand/model offered if applicable |
| • Film Processor: high-quality radiographs | ☐ Yes ☐ No | Insert details of goods offered |
| • Film size: Panoramic, Cephalometric, TMJ, Occlusal | ☐ Yes ☐ No | Insert details of goods offered |
| • all Intraorals Automatic chemistry replenishment and temperature maintenance | ☐ Yes ☐ No | Insert details of goods offered |
| • With built-microcomputer automatically signals the internal replenishment pumps to meter the proper amount of developer | ☐ Yes ☐ No | Insert details of goods offered |
| • fixer to maintain chemistry strength After films exit the processor | ☐ Yes ☐ No | Insert details of goods offered |
| • Automatic return to standby mode | ☐ Yes ☐ No | Insert details of goods offered |
| • Electricity use, water consumption, and system wear are reduced | ☐ Yes ☐ No | Insert details of goods offered |
| • Each film is fully developed and fixed Compliance with local codes | ☐ Yes ☐ No | Insert details of goods offered |
| – Built-in water recirculation system | ☐ Yes ☐ No | Insert details of goods offered |
| – Mains supply 200-240 VAC, 50/60 Hz | ☐ Yes ☐ No | Insert details of goods offered |
| – Delivered with all necessary accessories for proper operation | ☐ Yes ☐ No | Insert details of goods offered |
| 02-year warranty including spare parts and preventive and curative maintenance activities | ☐ Yes ☐ No | Insert details of goods offered |
| **Quality Certification:  CE or FDA certified;  ISO13485 certified; ISO 9001 or Manufacturer's QMS certificate ISO14001 Certificate SONCAP Certificate: Standard Organization of Nigeria Conformity Assessment Program** | ☐ Yes ☐ No | Insert details of goods offered |
|  | | | |
| 2 | **Dental X Ray Machine** | ☐ Yes ☐ No | Insert details of goods offered |
| The dental x-ray machine is used for taking Intra Oral Periapical and Occlusal X-ray  Stand-alone High resolution based on CCD/CMOS technology and RVG Compatible | ☐ Yes ☐ No | Insert details of goods offered |
| Tube voltage: minimum 65 KVP | ☐ Yes ☐ No | Insert details of goods offered |
| Tube current: minimum 8 mA | ☐ Yes ☐ No | Insert details of goods offered |
| Total filtration > 2 mm Al, Minimum range of exposure time range: 0.02 to 3.2 secs | ☐ Yes ☐ No | Insert details of goods offered |
| Manufactured with International Safety standards for radiation leakage | ☐ Yes ☐ No | Insert details of goods offered |
| Electronic selection of exposure time It should be possible to select exposure time manually. | ☐ Yes ☐ No | Insert details of goods offered |
| System Configuration: Accessories, spares, and consumables | ☐ Yes ☐ No | Insert details of goods offered |
| **The X-ray unit should have two sets of lead aprons and a thyroid protection collar.** | ☐ Yes ☐ No | Insert details of goods offered |
| Power input: 220-240VAC, 50Hz | ☐ Yes ☐ No | Insert details of goods offered |
| Delivered with a Servo Voltage stabilizer of appropriate ratings (meeting specifications: Input 160-260 V and output 220-240 V and 50 Hz) | ☐ Yes ☐ No | Insert details of goods offered |
| **Quality Certification:  CE or FDA certified;  ISO13485 certified; ISO 9001 or Manufacturer's QMS certificate ISO14001 Certificate SONCAP Certificate: Standard Organization of Nigeria conformity assessment program** | ☐ Yes ☐ No | Insert details of goods offered |
| User/Technical/Maintenance manuals to be supplied in English | ☐ Yes ☐ No | Insert details of goods offered |
| List of important spare parts and accessories with their part number | ☐ Yes ☐ No | Insert details of goods offered |
|  | | |
| **Dental CMOS Sensor** | ☐ Yes ☐ No | Insert details of goods offered |
| **Dimensions : 33 x 45 mm (maximum)** | ☐ Yes ☐ No | Insert details of goods offered |
| **Plate Thickness: 7.5mm (maximum)** | ☐ Yes ☐ No | Insert details of goods offered |
| Cable Length: 3 Meters (minimum) | ☐ Yes ☐ No | Insert details of goods offered |
| Resolution: 17 Ip/mm or better | ☐ Yes ☐ No | Insert details of goods offered |
| **Image Pixel Size: 25 μm or better** | ☐ Yes ☐ No | Insert details of goods offered |
| Detector: CMOS (or better), waterproof | ☐ Yes ☐ No | Insert details of goods offered |
| **Quality Certification:  CE or FDA certified;  ISO13485 certified; ISO 9001 or Manufacturer's QMS certificate ISO14001 Certificate SONCAP Certificate: Standard Organization of Nigeria conformity assessment program** | ☐ Yes ☐ No | Insert details of goods offered |
| **Delivered with:**  **A set of 500 dental sensors sterile wrappers** | ☐ Yes ☐ No | Insert details of goods offered |
| **A compatible Photo printer: Dye-sublimation printing method, Print with ISO 9001 or manufacturer’s QMS certificate.** | ☐ Yes ☐ No | Insert details of goods offered |
| media: at least 148 x 100 mm and 86 x 54 mm, a set of 500 sets of Photo Paper and Cartridge suitable for the photo printer delivered | ☐ Yes ☐ No | Insert details of goods offered |
| ISO 9001 or manufacturer’s QMS certificate. | ☐ Yes ☐ No | Insert details of goods offered |
| **02 years of warranty including preventive or curative maintenance activities (for the detector, workstation, and printer)** | ☐ Yes ☐ No | Insert details of goods offered |
| User/Technical/Maintenance manuals are to be supplied in English. | ☐ Yes ☐ No | Insert details of goods offered |
| A workstation and all necessary accessories for good operation  **PC Workstation: Intel i5 CPU (or better). 8GB RAM or better, 22-24” (minimum size) Display with a UPS (online) for the system unit.** | ☐ Yes ☐ No | Insert details of goods offered |

1. **Related services - Related services – Supplier is required to have the below equipment installed at the Consignee Delivery Location (General Hospital Jakusko and General Hospital Yufusufari, Damaturu, Yobe State, Republic of Nigeria)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item/ lot** | **Description of the services** | **Qty** | **Is Bid compliant?** Bidder to complete | **Details of Services offered.** Bidder to complete |
| **1.** | **Dental film processor (Award is OPTIONAL Based on the availability of budget – Bidder must Submit financial offer)** | **4 Units** | ☐ Yes ☐ No | Insert details of goods offered |
| **2** | **Dental X-Ray Machine**  **• Set up the Dental X-Ray Machine and its accessories at the two general hospitals in Jakusko (General Hospital Jakusko) and Yusufari (General Hospital Yusufari).**  **• Test and commission the Dental X-ray machines and their accessories.**  **• Train the technicians, operators, and end-users on the operation of the Dental X-ray machines and their accessories.** | **2 Units** | ☐ Yes ☐ No | Insert details of goods offered |

1. **Delivery requirements and Comparative Data Table:**

|  |  |  |  |
| --- | --- | --- | --- |
| **UNOPS Requirements** | | **Is Bid compliant?** Bidder to complete | **Details**  Bidder to complete |
| **Delivery time** | Bidder shall deliver the goods **within 6 Weeks** after Contract signature. | ☐ Yes ☐ No | Insert details |
| **Delivery place and Incoterms rules** | **CIP Mallam Aminu Kano International Airport, Kano, Nigeria (Incoterm 2020)** | ☐ Yes ☐ No | Insert details |
| **Consignee details** | United Nations Development  Programme, UN House  No. 617/618, Diplomatic Drive  Central Business District  Abuja, Nigeria  Tel: +234 813 361 1945  Email. nonso.orefo@undp.org,        CC: HerbertA@unops.org  Attn: Nonso Orefo | ☐ Yes ☐ No | Insert details |
| **UNOPS Right to vary requirements** | At the time the Contract is awarded, UNOPS reserves the right to vary the quantity of the goods and associated services specified above, provided this does not exceed +/- 20%], without any change in the unit prices or other terms and conditions of the ITB. | ☐ Yes ☐ No | Insert details |

1. **Inspections and tests**

The following inspections and tests shall be performed:

The goods will be inspected and tested by the consignee upon receipt of the goods at the at the delivery place. If any of the goods failed to meet the consignee minimum requirement as per the section II – Schedule of Requirement, the goods will be rejected and return to the supplier at the supplier own cost, and payment will not be made to the supplier until such goods are delivered

**Related services requirements**

[Provide details of how these services will be provided here]

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

☐ Yes ☐ No

ANY DEVIATION MUST BE LISTED BELOW:

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

**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 bid and bind [***insert full name of bidder***] should UNOPS accept this bid:

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

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

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

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

**Form E: Manufacturer’s Authorization Form (Lot-II)**

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]***

**Form F: Performance Statement Form (Lot-II)**

ITB reference no: [insert ITB reference No.]

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** | | **Remarks indicating reasons of late delivery, if any** | **Was the supply of goods satisfactory?** |
| **As per Contract** | **Actual** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

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

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

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

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

**DRIVE Supplier Sustainability Questionnaire**

**Included in the eSourcing Platform**

**Section VI: Contract Forms**

**VI-1: UNOPS General Conditions of Contract**

In the event of a Contract, the following General Conditions of Contract will apply:

* UNOPS General Conditions of Contract for the provision of Goods

The conditions are available at: <https://www.unops.org/business-opportunities/how-we-procure>

**VI-3: UNOPS sample contract for [add contract type]**

The sample: **Purchase Order** template is included in this ITB by this reference and is attached as a separate Pdf document.