

### Section III: Returnable Bidding Forms

**Note to Supplier: 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 your quotation.**

E sourcing reference: **Supply of Medical equipments to the Philippines - ITB Ref No: ITB/2024/52723**

This Section comprises the following Returnable Bidding Forms:

- Form A: Joint Venture Partner Information Form (*if applicable*)
- Form B: Bid Submission Form
- Form C: Price Schedule Form
- Form D: Technical Quotation Form
- Form E: Delivery Requirement Form
- Form F: Performance Statement Form
- Form G: One UNOPS Vendor Profile Form

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

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

E-sourcing case reference no:ITB/2024/52723

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.

The following criteria for the evaluation in case the bids are submitted as a Joint Venture/Consortium/Association.

- All parties of such joint venture, consortium, or association shall be jointly and severally liable to UNOPS for any obligations arising from their offer and the contract that may be awarded to them as a result of the solicitation process;
- The offer shall clearly identify the leading partner to act as the contact point to deal with UNOPS, as detailed in the appropriate returnable form/schedule. Such entity shall have the authority to make decisions, binding upon the joint venture, association, or consortium during the bidding process and, in the event that a contract is awarded, during the duration of the contract; and
- The composition or the constitution of the joint venture, consortium, or association shall not be altered without the prior consent of UNOPS.
- The eligibility criteria will be applicable for each joint venture partner.
- The qualification requirements mentioned in the qualifications section of the e-sourcing and in technical requirements will be considered for all partners of the JV combined. It means the JV will qualify even if one of the partners qualifies or they combinedly qualify.

<b>JV / Consortium/ Association Information</b>	
<b>Name</b>	[complete]
<b>Names of each partner and contact information</b> (address, telephone numbers, fax numbers, e-mail address)	[complete]
<b>Name of leading partner</b> (with authority to bind the JV, Consortium, Association during the Bidding process and, in the event a Contract is awarded, during contract execution)	[complete]
<b>Proposed proportion of responsibilities between partners (in %) with indication of the type of the goods/services to be delivered by each</b>	[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: Quotation 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: Supply of Medical equipments to the Philippines - ITB Ref No: ITB/2024/52723**  
, dated **[insert date]**

We, the undersigned, declare that:

- a. We offer to supply in conformity with the bidding documents, including the UNOPS General Conditions of Contract;
- b. Our quotation shall be valid for the period of time of **90 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;
- c. 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]**;
- d. 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;
- e. 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;
- f. We embrace the UN Supplier Code of Conduct and adhere to the principles of the UN Global Compact;
- g. 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;
- h. 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 : \_\_\_\_\_

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

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

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

**[Stamp form of bid with official stamp of the bidder]**

**Form C: Price Schedule Form**

E-sourcing Reference No: ITB/2024/52723

Name of Supplier: **[insert full name of supplier]**

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

- Bidders must offer 100% of the quantities specified for each of the items in the lot. Evaluation will be done per lot.
- As defined in Instructions to bidders, Article 3, bidders shall not submit more than one quotation and alternative quotations shall not be allowed.
- 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 No	Item	Product Details	Unit	Required QTY in Unit	Offered Qty in Unit (a)	Manufacturer/ country of origin	Make/ Model	Currency: [USD]			
								Unit price FCA (b)	Total price FCA C=(a)x(b)	Unit price DDP (Final Destinations, the Philippines) (d)	Total price DDP (Final Destinations, the Philippines) E=(a)x(d)
1	1	Blood Pressure (BP) Apparatus	pcs	335							
2	1	Ophthalmoscope (Direct)	pcs	848							
3	1	Otoscope	pcs	808							
4	1	Emergency Light	pcs	483							
	2	Examining Light	pcs	512							
5	1	Examining Table	pcs	140							
	2	Foot Stool	pcs	477							
	3	Instrument Table	pcs	136							
6	1	Nebulizer	pcs	511							

Lot No	Item	Product Details	Unit	Required QTY in Unit	Offered Qty in Unit (a)	Manufacturer/ country of origin	Make/ Model	Currency: [USD]			
								Unit price FCA (b)	Total price FCA C=(a)x(b)	Unit price DDP (Final Destinations, the Philippines) (d)	Total price DDP (Final Destinations, the Philippines) E=(a)x(d)
7	1	Non-mercurial thermometer	pcs	7,314							
8	1	Stethoscope	pcs	317							
9	1	Wheelchair	pcs	527							

❖ The quoted DDP price(s) must include the cost of the goods and accessories (if any), all the applicable taxes and duties, the total costs associated with delivering the goods at the designated final destinations (as per Section E. Delivery Breakdown Table for each lot), cost of the applicable warranties.

- ❖ Payment terms 30 days accepted:  Yes  No
- ❖ Accepts UNOPS General Conditions of Contract as specified in Section IV: Contract Forms:  Yes  No

The bidder is requested to filled the following shipment information

Lot No.	Shipment (air/sea)	Estimated Gross weight in kg	Volume in cm (length x width x height)	Number of cartons (or) pallets (or) boxes
1				
2				
3				
4				
5				
6				
7				
8				
9				

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

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

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

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

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

**FORM D: Technical Bid Form and Schedule of Requirements**

Bidders are required to complete the Comparative Data Tables below to demonstrate compliance with UNOPS minimum 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

**A. Technical Specifications and Quality Assurance Requirement**

**Note: “The Bidder may offer other standards of quality, brand names, and/or catalog numbers, provided that it demonstrates, to the Purchaser’s satisfaction, that the product offered ensures substantial equivalence or is superior in performance to those specified in the Schedule of Requirements. Deviations from the specs may be accepted and the product treated as compliant as long as the performance of the offered product remains the same as required or superior.”**

The products offered shall be manufactured with the required quality standards. UNOPS may ask for additional quality-related documents during the evaluation for all the lots, if required, and consider those for technical evaluation.

**1. Summary of Requirement:**

**Lot 1: Blood Pressure (BP) Apparatus**

Section I : UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	brand/model offered	
Manufacturer Warranty Period - <b>Minimum of 12 months</b>	Insert details	
SPHYGMOMANOMETER NON MERCURIAL (ADULT) WITH STAND	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>		
1. Offered product must be Brand new	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
2. Type : Aneroid, mercury-free	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
3. Accuracy ± 3 mmHg.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
4. Labelled artery tubes.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
5. Designed for hospitals or clinics.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
6. BP measurement scale up to 300 mmHg	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
7. Aneroid instrument mounted at approx. 20-degree angle.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
8. A large easy - to - read dial for quick and accurate BP measurements, with 300mmHg no pin stop calibrated scale, adjustable and enlarged colour dial plate of 15-18 cm diameter with numerical for easy reading.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

9. Durable plastic housing enclosure for the gauge.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
10. Assembly made of powder-Coated steel and high-grade plastic material.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
11. Standard cuff size(Adult) with Velcro closure ensures proper fit and secure fastening.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
12. Designed with 5 pieces caster wheel-based with a diameter of approx. 50 cm.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
13. Adjustable height centre pole	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
14. Standard BP cuff with manometer loop, adult-size bladder, bulb with spring inflation and standard end valve.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
15. Comes with a hardware kit and calibrated inflation system.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
16. Thermally treated diaphragm to maintain calibration.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
17. Holder for inflation cuff/stethoscope.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
18. Inflation bag airflow control and rubber valve ( latex-Free).	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
19. Spiral tube with appropriate connection for Velcro adult cuff	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
20. Measurement conditions :10 °C to 40 °C at 85% relative humidity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
21. Shock-resistant	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer:</u></b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> 1. Certificate of Quality Management System according to ISO <b>13485</b> and <b>ISO 9001</b> in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Supplier</b> <b>At the time of offer,</b> 1. Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV 2. Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

<b>Equipment</b> The equipment shall be CE marked or equivalent	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Delivery period:</b> Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

**Lot no.2 Direct Ophthalmoscope**

<b>Section I: UNOPS Minimum Technical Requirements</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
Offered brand/model number/Catalogue Number		brand/model offered
Warranty Period - minimum of 12 months		Insert details
Direct Ophthalmoscope Visualises the interior of the eye, with the instrument relatively close to the subject's eye and the observer viewing an upright magnified image.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>		
Tunable Brightness	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
- 5 apertures with red-free filter	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
- 19 diopter steps: -20D - +20D Range of lenses not smaller than -20D to +20D with steps not greater than 1D.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
- Light: LED White or LED Sunlight	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Magnification up to x15, in several selectable stages from direct vision to maximum magnification.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Anti-reflection lens.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Dust free sealed optics and aspherical optical system.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Supplied in protective, reclosable containers. On/off switch to be robust and easy to use. External material to be non-ferrous.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

Mobility, portability Handheld unit, single piece when in use.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Rechargeable batteries (lithium-ion) /alkaline batteries	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Supply with Instructions for assembly, use and maintenance in English, 1 x plastic protective hard case or strong protective pouch containing a full set.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<p style="text-align: center;"><b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <i>at the time of offer</i>:</b></p>	<p style="text-align: center;"><b>Is offer compliant? Bidder to complete</b></p>	<p style="text-align: center;"><b>Details of goods offered. Bidder to complete</b></p>
<p><b>Manufacturer</b>          1. Certificate of Quality Management System according to ISO 13485 and ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<p><b>Supplier</b>  <b>At the time of offer,</b>          1. Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV          2 Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered, if applicable</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<p><b>Equipment</b>          The equipment shall be CE marked or equivalent</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<p style="text-align: center;"><b>Section III - Requirement if awarded the Contract</b></p>	<p style="text-align: center;"><b>Is offer compliant? Bidder to complete</b></p>	<p style="text-align: center;"><b>Details of goods offered. Bidder to complete</b></p>
<p><b>1. Completion period:</b>          a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

**Lot 3 Otoscope**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	brand/model offered	
Warranty Period - minimum 12 months	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<p>Otoscope</p> <p>An electrically powered, hand-held device designed for examination of the outer ear canal and tympanic membrane (eardrum) by direct viewing through the ear opening.</p> <p>It consists of a main unit with a built-in light source intended to illuminate the interior of the ear canal with a detachable cone-shaped tube (speculum) inserted in the ear canal; it may facilitate the application of air pressure for pneumatic otoscopy. A dedicated power supply handpiece and/or an insufflation bulb may be included with the head.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>		
3X Magnification Including rotatable viewing lens with a magnification between 3 times.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
-Tunable brightness	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
- Larger view window	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
- Fiber optic illumination	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
- Light: LED White or LED Sunlight - Pneumatic test function	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Handle with a built-in LED light source in a mounted head.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Colour temperature: Cool white in the range 3,000-4,000K.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Including reusable, autoclavable specula.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Specula are cleanable with alcohol wipes	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Handle contains on/off switch.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Includes a port to connect an insufflation bulb.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Rechargeable batteries (lithium-ion) /alkaline batteries	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
It is able to withstand frequent cleaning and disinfecting with hospital grade products.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Supply with Instructions for assembly, use and maintenance in English 1 x Plastic protective hard case containing a full set. 2 x Sets of four reusable plastic specula different diameters ranging from 2 to 5mm. 1 x Set Rechargeable batteries (lithium-ion) /alkaline batteries 1 x Bulb and tube for pneumatic tests.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer</u>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> 1. Certificate of Quality Management System according to ISO 13485 and ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>At the time of offer,</b> <ol style="list-style-type: none"> <li>Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV</li> <li>Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered, if applicable</li> </ol>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>Equipment</b> The equipment shall be CE marked or equivalent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

**Lot 4, item 1 Emergency Light**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	brand/model offered	
Warranty : minimum 12 months	Insert details	
Emergency Light	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>		
Wattage: 2 x 3 Watts	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Luminous Flux: 2 × 300 lm	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Battery Type: Sealed Lead Acid/Ni Cad	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Color Temperature:5,500 - 6,500K/Daylight	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Light Source: High Brightness LED Chips	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Dimension: 297 mm x 271 mm x 92mm (appro)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Net Weight: around 1 kgs	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Body Material: Durable, fire-resistant thermoplastic or metal	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Body Color: White	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Battery Specification: 3.6 V / 4Ah	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Battery Protection: Over-Charge and Over-Discharge Protection	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Battery Life: Up to 120 minutes	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Test Button: Built-In Test Button	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Charging Time: 24 Hours	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Input Voltage: AC 220 V - 265 V	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Frequency Range: 50/60 Hz	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Mounting: Wall Mounted	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <i>at the time of offer</i>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
1. Certificate of Quality Management System according to ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
4. Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

Section III - Requirement if awarded the Contract	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

**Lot 4, item 2 Examination Light**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	<input type="text" value="brand/model offered"/>	
Warranty Period - minimum Two (2) years warranty on parts and service after commissioning and acceptance	<input type="text" value="Insert details"/>	
Examining Light	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>Technical Specifications</b>		
> Color of Lamp: White	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Light Source: LED, central reflector 18V / 12W	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Light Color: Appr, 4,300 K +/- 200 K	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Light Output: >50,000 Lux / 500mm	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Light field diameter D10: 100 / 160mm at 500 / 1,000mm	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Luminous flux: 160 lm	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Coloring index Ra: Typical 93	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Coloring index R9: Typical 90	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Light expectancy: >30,000 h (light source)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Switch: At the Lamp Head	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Electrical mains: 220-240 VAC, 60 Hz	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Working radius: Approximately 800mm	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Roller base: Steel	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Base Diameter: Approximately 635 mm	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
> Castors: Twin castors Conductive and lockable	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>STANDARD ACCESSORIES:</b> > 2 step-switch > 5 spare bulbs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

<b>STANDARD REQUIREMENTS</b> - Manual in the English Language Operation manual with soft copy 2 pcs soft copy must be included in the submission of bidding documents . Service manual with soft copy 2 pcs	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
> Two (2) years warranty on parts and service after commissioning and acceptance	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
> Declaration of conformity with ISO/IEC/PNS as issued by the manufacturer.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
> Certification on the availability of spare parts for the next 5 years	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer</u>:</b>	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
1. Certificate of Quality Management System according to ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
2 Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Section III - Requirement if awarded the Contract</b>	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

**Lot 5, item 1 Examination Table**

<b>Section I: UNOPS Minimum Technical Requirements</b>	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	brand/model offered	
Warranty Period - minimum 1 year	Insert details	
<b>EXAMINING TABLE WITH STIRRUPS FOR OB GYNE (Obstetrics and Gynecology Examinations)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>		
Offered product must be new	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Steel top 3 section adjustable (adjustable back section)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Table with epoxy-coated double drawer and 12-compartment door	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

Upholstered 3-section top, provided with detachable stirrup and mattress with cover	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Stainless steel drain pan	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Sliding rubber footstep	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Stainless steel heel detachable stirrup	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Size: 1,470mm (L) x 590mm(W) x 864mm (H) (+/- 10%)- folded footrest	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Highly resistant to corrosion	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>5 cm thick (at least)</b> , Highly density polyurethane foam mattress Plastic, flexible highly tear resistant, anti-static, flame retardant, disinfectant, and liquid Proof (washable) Epoxy coated tubular steel frame	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Lacquered frame	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Carrying capacity: 150kg (+/- 10%)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Complete set of tools for assembly	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Mounting clamps.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>With delivery and installation, provision of training to staff</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
With certificates and manual	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <i>at the time of offer</i>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> 1. Certificate of Quality Management System according to ISO <b>13485</b> and ISO <b>9001</b> in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Supplier</b> <b>At the time of offer,</b> a. Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV b. Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered, if applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Equipment</b> The equipment shall be CE marked or equivalent	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

<a href="#">Quality-Assurance.pdf</a>		
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Completion period:</b> 100% quantity within 30 days (under DDP term)_The delivery, installation, testing and commissioning of the equipment and its accessories, including the training of end-users and maintenance staff at designated locations should be completed within <b>30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>2. Pre-Installation requirements:</b> <ul style="list-style-type: none"> <li>a. The awarded supplier must clearly specify the pre-installation requirements that the recipient hospital must meet for the installation of the equipment and its accessories.               <ul style="list-style-type: none"> <li>i. Requirements of space dimensions for installation of the equipment and all accessory equipment.</li> <li>ii. Specify the minimum and maximum requirements for room temperature, humidity, heating, and air conditioning that must be respected for the proper function of the equipment.</li> </ul> </li> <li>b. UNOPS reserves the right to request clarifications to the supplier's proposed pre-installation requirements, to comply with its own standards and the supplier should modify them accordingly.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>3. Packaging, transport and environmental requirements:</b> <ul style="list-style-type: none"> <li>a. The equipment should have all safety markings in English.</li> <li>b. The equipment shall be packaged in accordance with international standards that are applicable for the shipment of this kind of equipment.</li> <li>c. Capable of being stored continuously in ambient temperature of 0-50 °C and relative humidity (RH) of 15-90%.</li> <li>d. Labeling on the primary packaging to include:               <ul style="list-style-type: none"> <li>i. Name and/or trademark of the manufacturer</li> <li>ii. Production year</li> <li>iii. Model or product reference</li> <li>iv. Information for particular storage conditions (temperature, pressure, light, humidity).</li> </ul> </li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>4. Delivery and installation:</b> <ul style="list-style-type: none"> <li>a. On-site delivery and installation to the recipient hospital is included</li> <li>b. The equipment transportation from the production site to the final recipient Hospital shall be covered by proper insurance paid by the supplier and issued in the name of the recipient Hospital.</li> <li>c. The Supplier shall be responsible to provide appropriate storage for the medical equipment until the facility /site is ready for immediate installation.</li> <li>d. The Supplier shall be responsible to ensure that no equipment will be delivered to the site before such time that the facility is ready and confirmed by the UNOPS for immediate installation.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

<p>e. The Supplier shall transport the equipment inside the hospital to the installation site/room, open the packages, assemble and install it according to the installation requirements.</p> <p>f. The supplier shall clean up the site of any packaging/shipping material after installation and after requesting the recipient hospital whether or not the original boxes must be left at the recipient hospital.</p>		
<p><b>5. Training:</b> The supplier must provide training/orientation on the use/operation and maintenance of the equipment and all its accessories for at least one (1) day to the end-users and for the maintenance staff.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<p><b>6. Warranty:</b></p> <p>a. The supplier must provide, as part of the offered price, a Warranty Certificate for one (1) year. Service maintenance shall be free of charge for the recipient Hospital throughout the warranty period.</p> <p>b. The warranty period shall start from the date of acceptance by the end-user after installation.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<p><b>9. Manuals:</b> The supplier shall provide to the end-users the Equipment Operator's/User's Manual and Service Manual</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

**Lot 5, item 2 Foot Stool**

<b>Section I: UNOPS Minimum Technical Requirements</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
Offered brand/model number/Catalogue Number		<a href="#">brand/model offered</a>
Warranty Period - minimum 1 year		<a href="#">Insert details</a>
<p><b>Foot Stool</b></p> <p>Medical Foot Step (double) Stool With ABS Platform For Hospital</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<p><b>Technical Specifications</b></p>		
SIZE: DOUBLE STEP 590 X 410 x 200/400MM (+/- 10%)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
ABS Platform	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Frame Made of SS Frame Tube	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Fitted On PVC Stumps Fitted	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Load capacity: 145 kg ( minimum)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Four stable legs with anti-slip feet provide maximum support	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<p><b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer:</u></b></p>	<b>Is offer compliant? Bidder to</b>	<b>Details of goods offered. Bidder to complete</b>

	<b>complete</b>	
1. Certificate of Quality Management System according to ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
3. Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

**Lot 5, item 3 Instrument Table**

<b>Section I: UNOPS Minimum Technical Requirements</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
Offered brand/model number/Catalogue Number	<a href="#">brand/model offered</a>	
Warranty Period - minimum 1 year	<a href="#">Insert details</a>	
Instrument Table	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Technical Specifications</b>		
Material: Rectangular table made of stainless steel or equivalent durable, easy-to-clean material	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
80cm(L)x50cm(W)x90cm(H) (Minimum)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Equipped with swivel casters, including at least two with brakes for stability	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <i>at the time of offer</i>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
1. Certificate of Quality Management System according to ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
4. Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

Section III - Requirement if awarded the Contract	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
<b>1. Completion period:</b> 100% quantity within 30 days (under DDP term)_The delivery, installation, testing and commissioning of the equipment and its accessories, including the training of end-users and maintenance staff at designated locations should be completed within <b>30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>2. Pre-Installation requirements:</b> <ul style="list-style-type: none"> <li>c. The awarded supplier must clearly specify the pre-installation requirements that the recipient hospital must meet for the installation of the equipment and its accessories.               <ul style="list-style-type: none"> <li>i. Requirements of space dimensions for installation of the equipment and all accessory equipment.</li> <li>ii. Specify the minimum and maximum requirements for room temperature, humidity, heating, and air conditioning that must be respected for the proper function of the equipment.</li> </ul> </li> <li>d. UNOPS reserves the right to request clarifications to the supplier's proposed pre-installation requirements, to comply with its own standards and the supplier should modify them accordingly.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>3. Packaging, transport and environmental requirements:</b> <ul style="list-style-type: none"> <li>e. The equipment should have all safety markings in English.</li> <li>f. The equipment shall be packaged in accordance with international standards that are applicable for the shipment of this kind of equipment.</li> <li>g. Capable of being stored continuously in ambient temperature of 0-50 °C and relative humidity (RH) of 15-90%.</li> <li>h. Labeling on the primary packaging to include:               <ul style="list-style-type: none"> <li>i. Name and/or trademark of the manufacturer</li> <li>ii. Production year</li> <li>iii. Model or product reference</li> <li>iv. Information for particular storage conditions (temperature, pressure, light, humidity).</li> </ul> </li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>4. Delivery and installation:</b> <ul style="list-style-type: none"> <li>a. On-site delivery and installation to the recipient hospital is included</li> <li>b. The equipment transportation from the production site to the final recipient Hospital shall be covered by proper insurance paid by the supplier and issued in the name of the recipient Hospital.</li> <li>c. The Supplier shall be responsible to provide appropriate storage for the medical equipment until the facility /site is ready for immediate installation.</li> <li>d. The Supplier shall be responsible to ensure that no equipment will be delivered to the site before such time that the facility is ready and confirmed by the UNOPS for immediate installation.</li> <li>e. The Supplier shall transport the equipment inside the hospital to the installation site/room, open the packages, assemble and install it according</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

to the installation requirements. f. The supplier shall clean up the site of any packaging/shipping material after installation and after requesting the recipient hospital whether or not the original boxes must be left at the recipient hospital.		
<b>5. Training:</b> The supplier must provide training/orientation on the use/operation and maintenance of the equipment and all its accessories for at least one (1) day to the end-users and for the maintenance staff.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>6. Warranty:</b> c. The supplier must provide, as part of the offered price, a Warranty Certificate for one (1) year. Service maintenance shall be free of charge for the recipient Hospital throughout the warranty period. d. The warranty period shall start from the date of acceptance by the end-user after installation.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

**Lot 6, Nebulizer**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	brand/model offered
Warranty Period - minimum 1 year	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Nebulizer : Nebuliser for the treatment of upper/lower respiratory system and for the delivery of nebulised drugs.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Features: Reusable inlet filter for simple, cost-effective maintenance.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Anti-vibration feet for stability on any stable work surface.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Dispenses approx. 3 cc of medication in 10 minutes or less.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Convenient handle for easy portability and mobility.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Storage compartment for accessories and tubings.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Hidden compartment for cord storage.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Specification: Mouthpiece - "T" mouthpiece with 6" reservoir tube and 7" supply tube.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Electrical rating -220 -240V ,60Hz	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Max pressure - 35psi.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

Max flow -14 lpm.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Operation flow rate approximatelv 5.5 lpm	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Nebulization rate - 0.2- .3ml/min.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Particle size -0.5-5 microns.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Weight -2.0-2.1 kgs.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Noise level ≤ 55 dB.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Sturdy construction, suitable to be disinfected with hospital-grade products	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Supply with Instructions for assembly, use and maintenance in English. 1 x carry bag (depending on model supplied). 2 x reusable mouthpiece. 2 x air tubing set. 4 x reusable adult face masks. 4 x reusable paediatric face masks. 5 x air filters (depending on the model supplied). 2 x nebuliser tank.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer</u>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> 1. Certificate of Quality Management System according to ISO <b>13485</b> and ISO <b>9001</b> in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Supplier</b> <b>At the time of offer,</b> 1 Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV 2 Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Equipment</b> The equipment shall be CE marked or equivalent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
. Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

Section III - Requirement if awarded the Contract	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

**Lot 7, Non-mercurial thermometer**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	<input type="text" value="brand/model offered"/>	
Warranty Period - minimum 1 year	<input type="text" value="Insert details"/>	
<b>Non-mercurial thermometer</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
<b>Technical Specifications</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Battery Operated Digital (LCD)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Thermometer with probe.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
With Minimum Reading of at least ( - 20 °C )and Maximum Reading of at least 100 °C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Waterproof casing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
With Calibration Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Glass and mercury free.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Digital, electronic version	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Accuracy ± 0.1°C in the range 35 – 41 °C.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Graduation 0.3°C or better.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Ready-to-use after switch-on within 10 s.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Measurement time: within 120 seconds.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Low and high temperature indication.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Display easy to read in all levels of ambient light.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Automatic switch-off when not in use.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>
Beep audio alert when device is turned on/ready to use or when temperature measurement is complete.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Insert details"/>

Low battery indicator.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Full batteries allow for a minimum of 4,000 measurements. Waterproof.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Designed to withstand frequent cleaning and disinfection with hospital-grade products.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Battery powered, batteries included in the supply, preferably packed separately.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
SUPPLIED WITH Instructions for assembly, use and maintenance in English, Supplied in rigid plastic protective case.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer</u>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> 1. Certificate of Quality Management System according to ISO <b>13485</b> and ISO 9001 in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Supplier</b> <b>At the time of offer,</b> <ol style="list-style-type: none"> <li>3. Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV</li> <li>4. Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered (if applicable)</li> </ol>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Equipment</b> The equipment shall be CE marked or equivalent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

**Lot 8, Stethoscope**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	brand/model offered	
Warranty Period - minimum Two (2) years warranty	Insert details	
Stethoscope, binaural, including accessories  designed for listening to sounds from the heart, lungs, and/or gastrointestinal tract from adult and paediatric patients. It comprises a membrane at the listening head connected by a dual tube to the headgear with ear olives that are placed into the users' ears.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Comprises a chest piece connected by a double tube to the headgear with earpieces that are placed into the users' ears.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Double cup, with two diaphragms for dual-use (adult and pediatric auscultation) chest piece in zinc alloy.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Adult diaphragm $\varnothing$ : 45.5mm +/- 10 %;	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
paediatric diaphragm $\varnothing$ : 31.5mm +/- 10 %.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
The tube is made of PVC and is crack-resistant.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
The tube is impervious to outside noises, guaranteeing full transmission of sound, and good auditive quality.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Tube diameter: outer diameter 10mm, inner diameter 4.8mm.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Tube length 560mm.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Sensitivity from 3.2dB to 26dB in a range from 50 to 1000 Hz for cardiology.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Sensitivity 8.1dB in a range from 600 Hz to 1,500 Hz for pneumology.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Arms: brass steel with a flexible spring	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Removable plastic earpieces.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Latex-free.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Designed for frequent and easy disassembly and disinfection with hospital-grade products.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
SUPPLIED with Instructions for assembly, use, and maintenance in English,	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

1 x spare adult diaphragm. 1 x spare pediatric diaphragm. 1 x set of spare earpieces.		
<b>ESTIMATED LIFE SPAN</b> :5 years	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer</u>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> Certificate of Quality Management System according to ISO <b>13485</b> and ISO <b>9001</b> in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>
<b>Supplier</b> <b>At the time of offer,</b> 1 Valid and current Licence to Operate (LTO) as a medical device distributor in the Philippines on behalf of the supplier/bidder or on behalf of any of the parties in case of a JV 2 Valid and current Certificate of Product Registration (CPR) or Certificate of Product Notification (CPN) in the Philippines for the brand and model of the equipment offered (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>
<b>Equipment</b> The equipment shall be CE marked or equivalent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>
The product shall comply with UNOPS QA policy as applicable as can be seen at <a href="https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf">https://content.unops.org/service-Line-Documents/Procurement/Annex-2B-Quality-Assurance.pdf</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="button" value="Insert details"/>

**Lot 9, Wheelchair**

Section I: UNOPS Minimum Technical Requirements	Is offer compliant? Bidder to complete	Details of goods offered. Bidder to complete
Offered brand/model number/Catalogue Number	brand/model offered	
Warranty Period - minimum one year warranty	Insert details	
<b>Wheelchair</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Technical Specifications</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Transport Wheelchair, Adult, and Child Frame Material: Aluminium, steel, or lightweight alloy, with a powder-coated or anodized finish	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Environment: Primarily used indoors or even surfaces outdoors Seat and Backrest Material: Durable nylon or reinforced vinyl, with optional high-density foam padding for added comfort	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Function: Typically used intermittently for short duration or for short distance transportation.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Primarily for assistant-controlled mobility. Limited manual mobility of large rear wheels.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Posture support: User with basic posture support needs.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Armrest and Footrest Material: High-impact plastic or padded vinyl-covered surfaces for comfort and durability	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Wheels and Castors Material: Solid rubber or polyurethane tires, with aluminium or composite rims for strength and durability.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Upholstery Material: Breathable, antimicrobial-treated fabric to ensure comfort and hygiene.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Leg and Arm Supports: Adjustable aluminium or steel supports with padding, designed for easy cleaning and comfort.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Footplates Material: Aluminium or reinforced plastic for strength and lightweight.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
Hardware: Stainless steel or coated steel nuts, bolts, and screws for corrosion resistance.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details
<b>Frame:</b> 4-wheels Folding frame Push handles Fixed backrest height, at least midthoracic: height of target population Tipping lever Fixed seat/frame depth Rear wheels: diameter: From 8"(attendant mobility) up to 26" (independent	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insert details

mobility)		
<b>Front castors:</b> Diameter: 8" Width: 1-2" COG frame adjustments: None	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Size range: Size width range: Minimum 4 sizes	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section II - Documents, Certifications &amp; Standard Required. to be presented by the bidder in the offer <u>at the time of offer</u>:</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>Manufacturer</b> 1. Certificate of Quality Management System according to ISO <b>9001</b> in the name of the manufacturer for the product offered. The Certificate must be issued by an independent Certifying Body/Agency.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
Product brochure, technical data sheet(s), and user instruction of the equipment in English that allows verifying compliance with the technical specifications.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>
<b>Section III - Requirement if awarded the Contract</b>	<b>Is offer compliant? Bidder to complete</b>	<b>Details of goods offered. Bidder to complete</b>
<b>1. Completion period:</b> a. Delivery to final destinations - <b>Within 30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">Insert details</a>

**2. Other Requirements**

No.	UNOPS Minimum Requirements	Is quotation compliant? Bidder to complete	If No, please complete the reasons and details
i	<p><b>Packaging and Labelling Specifications</b></p> <p>a) Should be standard as per the regulations applicable.</p> <p>b) Special packaging and notification is required for easily breakable material.</p> <p>c) All labelling and packaging inserts shall be in English.</p> <p>d) Should be strong enough for transport and to resist any mishandling.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
ii	<p><b>Defect</b></p> <p>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.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
iii	<p><b>Recall</b></p> <p>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.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
iv	<p><b>Sustainability Requirement</b></p> <p>Bidder must provide one or all of the following:</p> <ul style="list-style-type: none"> <li>• Documentation confirming the presence of a valid Environmental Management System such as ISO 14001 or equivalent; ; (or)</li> <li>• A copy of the organization’s sustainability policy; ; (or)</li> <li>• A copy of the organization’s latest corporate social responsibility report; ; (or)</li> <li>• A copy of the organization’s most recent UN Global Compact Communication on Progress report; ; (or)</li> <li>• A signed statement from the President (or other executive officer) confirming the organization's commitment to sustainability</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide the valid and relevant document	
v	<p><b>Suppliers commitment to gender equality</b></p> <p>The bidder shall provide a response that demonstrates its commitment to support gender equality and women’s empowerment through its operations.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide the valid and relevant document	

No.	UNOPS Minimum Requirements	Is quotation compliant? Bidder to complete	If No, please complete the reasons and details
vi	DRIVE Supplier Sustainability Questionnaire	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide the valid and relevant document	
vii	<p><b>In the case of a joint venture, consortium or association:</b></p> <p>(i) All parties of such joint venture, consortium, or association shall be jointly and severally liable to UNOPS for any obligations arising from their offer and the contract that may be awarded to them as a result of the solicitation process;</p> <p>(ii) The offer shall clearly identify the leading partner to act as the contact point to deal with UNOPS, as detailed in the appropriate returnable form/schedule. Such entity shall have the authority to make decisions, binding upon the joint venture, association, or consortium during the Case Ref: ITB/2024/52723 bidding process and, in the event that a contract is awarded, during the duration of the contract; and</p> <p>(iii) The composition or the constitution of the joint venture, consortium, or association shall not be altered without the prior consent of UNOPS.</p> <p>(iv) The eligibility criteria will be applicable for each joint venture partner.</p> <p>(v) The qualification requirements mentioned in the qualifications section of the solicitation documents and in technical requirements ( like Licence to Operate (LTO) , after-sales service etc) will be considered for all partners of the JV combined. It means the JV will qualify even if one of the partners qualifies or they combinedly qualify.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide the valid and relevant document	

**Form E: Delivery Requirement Form**

◆ **Delivery requirements — Comparative Data Table**

UNOPS Requirements		Is a quotation compliant? Bidder to complete	If No, Provide comments
<b>Delivery Schedule</b>	100% Quantity delivered to the final destinations - <b>Within 30 days</b> from the date of issuance of PO	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	For Lot 5, item 1 & 3 , 100% quantity within 30 days (under DDP term) The delivery, installation, testing and commissioning of the equipment and its accessories, including the training of end-users and maintenance staff at designated locations should be completed within <b>30 days</b> from the date of issuance of PO.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Delivery place and Incoterms rules</b>	DDP Final destination, Philippines (duties & taxes and customs clearance included) (Please refer to the delivery breakdown for details.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Mode of Transport</b>	Any (Air/Sea) if Imported, provided consignment reaches as per requested delivery schedule	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Consignee Details</b>	Local Bidder/ Local partner of the bidder on behalf of DoH the Phillippines	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>UNOPS Right to vary requirements</b>	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.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

ANY DEVIATION MUST BE LISTED BELOW:

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

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

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

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

**B. Delivery Breakdown Table for each lot**

Detail was enclosed in the Annex I\_ Delivery Breakdown Table for each lot

**Form F: Performance Statement Form**

(Bidder should be in continuous business of supplying the same or similar products for the last [2] Calendar years from the bid closing.)

ITB reference no:ITB/2024/52723

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 supplies of goods satisfactory
				As per Contract	Actual		

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

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

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

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

**Form G: One UNOPS Supplier Profile Form**

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

UNOPS		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/mm m/yyyy)
UNGM Number*		VAT registration no.			
Country		Date of birth (dd/mmm/yyyy)	(For individuals only)		
Identity Document Type	<input type="checkbox"/> National ID	<input type="checkbox"/> Passport	<input type="checkbox"/> Other, please specify:		
Identity document no.		Issue date (dd/mmm/yyyy)		Expiry date (dd/mmm/yyyy)	
Supplier Group (Select one of the below options)					
<input type="checkbox"/> Company (Private or Public)*	<input type="checkbox"/> University/educational institution	<input type="checkbox"/> UN Agency /Institution			
<input type="checkbox"/> External Individual	<input type="checkbox"/> IGO(Intergovernmental Organization)	<input type="checkbox"/> Government Agency			
<input type="checkbox"/> Financial institution (including insurance and banking)	<input type="checkbox"/> NGO(Nongovernmental Organization)				
* UNOPS requires Companies to register with the United Nations Global Marketplace on <a href="http://www.ungm.org">www.ungm.org</a> (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			

<b>Branch code</b>		<b>Bank account currency</b>	
<b>Branch name</b>		<b>Bank account type</b>	<input type="checkbox"/> Checking <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Cheque Other please specify
<b>Bank's street address</b>			
<b>City</b>		<b>Postal code (ZIP)</b>	
<b>State/province</b>		<b>Country</b>	
<b>Intermediary/correspondent bank, if applicable</b>			
<b>Name of intermediary bank</b>			<b>Intermediary IBAN no.</b>
<b>Country of intermediary bank</b>		<b>SWIFT /BIC code</b>	<b>Clearing code/bank code</b>
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.			
<b>Supplier/Supplier's Representative's Signature and Stamp</b>			<b>Date and Place</b>

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?
	<input type="checkbox"/> New <input type="checkbox"/> Update existing supplier	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name of Requester (UN)</b> (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.			
		<b>Signature of Requester</b>		<b>Date</b>	