**Form A: Contractor's Profile**

The contractor shall fill in this Form in accordance with the instructions indicated below. No alterations to its format shall be permitted and no substitutions shall be accepted.

Reference no: **EAPMCO/PNG/2024/071**

Name of Contractor: [insert name of contractor]

Date: [insert submission date]

1. **Background and Expertise of Organization:**

|  |  |
| --- | --- |
| **Full legal name of Contractor** | [complete] |
| **What year was your firm/organization established?** | [complete] |
| **Address of registered office** | [complete] |
| **Name of contractor Representative** | complete] |
| **Has your firm/organization ever filed or petitioned for bankruptcy?** (If YES, explain in detail the reasons why, filing date, and current status.) | [complete] |
| **Does your firm have an actual or potential conflict of interest in this procurement process?** (Refer to Section II: Instructions to Contractors, Article 4, for details on conflict of interest) | [Insert either “No”, or “Yes” in which case please provide details on your actual or potential conflict of interest here] |

1. **UNGM Registration and UNOPS Vendors**

As part of the bid, it is desired that the Contractor goes to the United Nations Global Marketplace (UNGM) registration website: <https://www.ungm.org/Account/Registration> and fills out the registration.

If the Contractor is already registered with UNGM, please provide your UNGM registration number in the table below and please ensure that your firm’s information on UNGM is current.

The Contractor may still bid even if not registered with the UNGM. However, if the Contractor is selected for Contract award, the Contractor must register on the UNGM prior to Contract signature.

|  |  |
| --- | --- |
| **Are you a UNGM registered vendor?** | ☐ Yes ☐ No If yes, [insert UGNM vendor number] |
| **Are you a UNOPS vendor?** | ☐ Yes ☐ No |

1. **Contact details of persons that UNOPS may contact for requests for clarification during bid evaluation:**

|  |  |
| --- | --- |
| **Name/Surname** | [complete] |
| **Title** | [complete] |
| **Tel Number (direct)** | [complete] |
| **Email address (direct):** | [complete] |

PS: This person must be available during the next two weeks following receipt of bid

# **Form B: Previous Experience Form**

Reference no: **EAPMCO/PNG/2024/071**

Name of Contractor: [insert name of Contractor]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Description of services/goods** | **Country** | **Total amount of Contract** | **Contract Identification and Title and**  **Contact details of Client**  **(Name, Address, telephone, email, fax)** | **Year project was undertaken** | **Country of origin** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

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

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

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

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