**Annex 2**

# FORM FOR SUBMITTING SERVICE PROVIDER’S PROPOSAL[[1]](#footnote-1)

***(This Form must be submitted only using the Service Provider’s Official Letterhead/Stationery[[2]](#footnote-2))***

[insert: *Location]*.

[insert: *Date]*

To: **UNDP Iraq, Procurement Unit, Service Center**

Dear Sir/Madam:

We, the undersigned, hereby offer to render the services for the **RFP 073/18**- **Provision of professional services to conduct solid waste management/value chain assessment in the Kurdistan Region of Iraq IKRI)** to UNDP in conformity with the requirements defined in the RFP dated \_\_\_\_\_\_\_\_\_\_\_\_\_ , and all of its attachments, as well as the provisions of the UNDP General Contract Terms and Conditions:

1. **Qualifications of the Service Provider**

|  |
| --- |
| The Service Provider must describe and explain how and why they are the best entity that can deliver the requirements of UNDP by indicating the following:   1. Profile – describing the nature of business, field of expertise, licenses, certifications, accreditations; 2. Business Licenses – Registration Papers, Tax Payment Certification, etc. 3. Latest Audited Financial Statement – income statement and balance sheet to indicate Its financial stability, liquidity, credit standing, and market reputation, etc.; 4. Track Record – list of clients for similar services as those required by UNDP, indicating description of contract scope, contract duration, contract value, contact references; 5. Certificates and Accreditation – including Quality Certificates, Patent Registrations, etc. 6. Written Self-Declaration that the company is not in the UN Security Council 1267/1989 List, UN Procurement Division List or Other UN Ineligibility List. 7. Professional capacity: Minimum of 3 years of institutional experience in SWM and market linkages 8. Technical capacity: Previous experience on implementation of the similar projects in Iraq or the Middle East is an advantage |

1. **Proposed Methodology for the Completion of Services**

The Service Provider must describe how it will address/deliver the demands of the RFP; providing a detailed description of the essential performance characteristics, reporting conditions and quality assurance mechanisms that will be put in place, while demonstrating that the proposed methodology will be appropriate to the local conditions and context of the work.

**Qualifications of Key Personnel**

|  |
| --- |
| The Service Provider must provide:     1. Names and qualifications of the key personnel that will perform the services indicating who is   Project Manager, who are supporting, etc.;   1. CVs demonstrating required qualifications must be submitted if required by the RFP and 2. Written confirmation from each personnel that they are available for the entire duration of the contract. 3. If any of the key personnel in proposed team is a regular employee of any organization, s/he have to attach consent letter from the person’s employer in favor of her/his engagement/service in this assignment. |

**Cost Breakdown per Deliverable\***

|  |  |  |  |
| --- | --- | --- | --- |
| **Deliverables** | **Description** | **Percentage of**  **Total Price *(Weight for payment)*** | **Price USD**  ***(Lump Sum,***  ***All Inclusive)*** |
| **1** | Upon submission of first interim report and accepted by UNDP | **40%** |  |
| **2** | Upon submission of second interim report and accepted by UNDP | **30 %** |  |
| **3** | Upon submission of the final draft report and accepted by UNDP | **30 %** |  |

*\*This shall be the basis of the payment tranches*

**Cost Breakdown by Cost Component *[This is only an Indicative Example. Bidder is expected to submit financial proposal according to proposed proposal]*:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description of Activity** | **Daily Fees in USD** | **Total Period of**  **Engagement** | **No. of Personnel** | **Total Rate in USD** |
| **I. Personnel Services** |  |  |  |  |
| **Inside Iraq Fees** |  |  |  |  |
| Project Manager |  |  |  |  |
| Solid Waste Management Staff |  |  |  |  |
| Assessment Staff |  |  |  |  |
| * Other staff related cost as applicable, i.e. interviewers, data enumerators, data analyst |  |  |  |  |
| **Home based fees or Outside Iraq (if Required)** |  |  |  |  |
| **\*\*** |  |  |  |  |
| **\*\*** |  |  |  |  |
| **\*\*** |  |  |  |  |
| **TOTAL CONSULTANCY FEES IN USD** | | | |  |

\*The company could add other staff if required by the proposed proposal.

\*\* Please indicate position as applicable.

**Note:** Inside Iraq Fees (All Inclusive): **(i.e. of professional daily rate, daily living allowance rate..etc…)**

Outside Iraq Fees (All Inclusive): **(i.e. of professional daily rate, daily living allowance rate..etc…)**

Home based Fees include: **(professional fees only).**

**B.2 Reimbursable Fees:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No. | **Description** | **Unit** | **\*\*QTY** | **No. of Personnel to Travel** | **Unit Price in USD** | **Total Price in USD** |
| **1** | **Travel Costs (Air if applicable)** | | | | | |
| 1.1 | Erbil | Each |  |  |  |  |
| 1.2 | Duhok | Each |  |  |  |  |
| 1.3 | Sulaimaniya | Each |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **2** | **Miscellaneous:** | | | | | |
| 2.1 | Visas | Each |  |  |  |  |
| 2.2 | Transportation (local) | Lump Sum |  |  |  |  |
| 2.3 | Stationery and related costs | Lump Sum |  |  |  |  |
| 2.4 | Equipment and related items | Lump Sum |  |  |  |  |
| 2.5 | Communication | Lump Sum |  |  |  |  |
| 2.6 | Other office cost; if any | As required |  |  |  |  |
| ***Total Reimbursable Costs in USD:*** | | | | | |  |

\*Reimbursable costs quoted will be subject to verification by UNDP during the financial evaluation.

\*\* The company should indicate the quantity and number of Personnel required.

\*\*\*The company should indicate all flights that will take place by the assigned personnel and to indicate from which destination to which destination is travel taking place.

\*\*\*\*The company should quote for any other reimbursable costs if required and as applicable.

*[Name and Signature of the Service Provider’s*

*Authorized Person]*

*[Designation]*

*[Date]*

1. This serves as a guide to the Service Provider in preparing the Proposal. [↑](#footnote-ref-1)
2. Official Letterhead/Stationery must indicate contact details – addresses, email, phone and fax numbers – for verification purposes [↑](#footnote-ref-2)