Section III: Returnable Bidding Forms

**eSourcing reference**: RFQ/2019/11933

Note to Bidders: The following returnable forms are part of this RFQ and must be completed and returned by bidders as part of their quotation. 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 your quotation by uploading them against their specific Document Checklist in the UNOPS eSourcing system.

This Section comprises the following Returnable Bidding Forms:

* Form A: Quotation Submission Form
* Form B: Price Schedule Form
* Form C: Technical Proposal Form
* Form D: Previous Experience Form
* Form E: Format for Resume of Proposed Key Personnel

Form A: Quotation 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: Quotation for the supply of** ***Private Sector Engagement Services for UNOPS/WSSCC*** **in** Switzerland, Geneva, RFQ Case No. [RFQ/2019/11933], dated **[insert date]**

We, the undersigned, declare that:

* 1. We offer to supply in conformity with the bidding documents, including the UNOPS General Conditions of Contract;
  2. Our quotation shall be valid for the period of time of 30 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;
  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 [If you have any actual or potential conflict of interest as defined in Article 3 of Section I: Instructions to Bidders, please disclose it here];;
  4. 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;
  5. 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;
  6. We embrace the UN Supplier Code of Conduct and adhere to the principles of the UN Global Compact;
  7. 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;
  8. 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: [complete]

Title: [complete]

Date: [complete]

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

Provide the name and contact information for the primary contact from your company for this quotation:

Name: [complete]

Title: [complete]

Email address: [complete]

Telephone: [complete]

# Form B: Price Schedule Form

RFQ Bidders shall fill in this Price Schedule Form in accordance with the instructions indicated.

RFQ reference no: RFQ/2019/11933

|  |  |
| --- | --- |
| **Currency** | USD |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item No** | **Description** | **Indicative Share of total** | **Consultant** | **Per Day Rate** | **Number of Days\*** | **Total** |
| 1 | **Inception report** with:  Identification of 20 companies from Oil and Gas, manufacturing, Communication sectors with potential interest in contributing to WSSCC work in support of LGA is Benue and Cross River amongst others.  Concept note with description of approach, description of roundtable event on 28-30 November (including suggested invitee list) and additional events planned between October 2019 - February 2020 (roadmap: who, where, when) |  | Lead Consultant | ***Insert*** | ***Insert*** | ***Insert*** |
| 2 | **Deliverables**  3 Roundtable events for WSSCC specifically featuring industries and philanthropists  15 bilateral meetings with entities with potential interest  Input to the PowerPoint presentation, hand-outs and other promotional and marketing products to attract Private Sector Funding for WSSCC  Summary document of Nigerian private sector donors with potential interest in WSSCC’s mandate, with complete contact details and a short description of pitch/area of interest  Regular written advice on how to approach the market and target private sector companies for contributions to WSSCC’s mandate, as well as suggested focal points where relevant |  | Lead Consultant | ***Insert*** | ***Insert*** | ***Insert*** |
| 3 | **End-of-consultancy report**  End-of consultancy report with overview of approach, activities that have taken place, justification of use of time/nr of days worked, contacts established, challenges, follow up actions and recommendations for the way forward (how Private Sector can contribute, how WSSCC can mobilize private sector funding). |  | Lead Consultant | ***Insert*** | ***Insert*** | ***Insert*** |
|  |  |  | **Total Amount**  **(Items 1,2 and 3)** | | | ***Insert*** |

**\*** The estimated total number of shared level of effort should not exceed 60 days.

Payment terms 30 days accepted:  Yes

**Bidder’s discount for accelerated payment:** \_\_\_\_% of total firm price for each calendar day less than thirty (30) days

**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 quotation and bind [***insert full name of Bidder***] should UNOPS accept this quotation:

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

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

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

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

Form C: Technical Proposal Form

ITB reference no: RFQ/2019/11933

Name of Bidder: [insert name of bidder]

Bidders are required to complete the below **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.

|  |  |
| --- | --- |
| **Section 1: Review methods and process** | |
| 1.1 A draft proposal on methods and process for the review | [Insert response here or insert page number where this is located in your response to this RFQ] |
| **Section 2: Qualifications, capacity and expertise of the offeror, including of key personnel proposed** | |
| 2.1 The names of proposed personnel and summary of their relevant experience | Lead Consultant:  [Insert response here or insert page number where this is located in your response to this RFQ] |
| Other Consultant (s), if any:  [Insert response here or insert page number where this is located in your response to this RFQ] |
| 2.3 The proposed personnel meeting the requirements | [Confirm attaching CVs Form E – CVs of proposed personnel] |
| **Section 3: Timeframe and work plan** | |
| 3.1 Timeframe and work plan provided to demonstrate that the proposer will complete the work in the time allotted per Section II | [Insert response here or insert page number where this is located in your response to this RFQ] |

The offered goods and related services (if applicable) are in accordance with the required specifications and requirements specified in **Section II: 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 D: Previous experience form

RFQ reference no: RFQ/2019/11836

Name of **RFQ Bidder**: [insert name of **RFQ Bidder**]

| **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** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

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

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

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

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

**Form E: Format for Resume of Proposed Key Personnel**

RFP reference no: RFQ/2019/11836

Name of Offeror: [insert name of Offeror]

|  |  |
| --- | --- |
| **Position** | [Insert] |
| **Name of Personnel** | [Insert] |
| **Title** | [Insert] |
| **Years with firm** | [Insert] |
| **Nationality** | [Insert] |
| **Language proficiency** | [Insert] |
| **Education/ Qualifications** | [Summarize college/university and other specialized education of personnel member, giving names of schools, dates attended, and degrees/qualifications obtained.] |
| **Professional certifications** | [Provide details of professional certifications relevant to the scope of services]   * Name of institution: [Insert] * Date of certification: [Insert] |
| **Employment Record/ Experience** | [Starting with present position, list in reverse order, every employment held. List all positions held by personnel since graduation, giving dates, names of employing organization, title of position held and location of employment. For experience in last five years, detail the type of activities performed, degree of responsibilities, location of assignments and any other information or professional experience considered pertinent for this assignment.] |
| **References** | [Provide names, addresses, phone and email contact information for two (2) references]  Reference 1:  Reference 2: |

I, the undersigned, certify to the best of my knowledge and belief, this bio-date is accurate.

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

Signature of Personnel (individual) or firm representative Date (Day/Month/Year)

**75 00ax: +45 45 33 75 01**