## OFFER FORM ACTED *South Sudan*

Tender N° (filled in by ACTED): **RFQ/32EFU/K10AME/JUBA//27-12-2023/260**

Order ID (filled in by ACTED): **260**

Date (filled in by Bidders):

## To be Filled by Bidder (COMPULSORY)

|  |  |
| --- | --- |
| **Company’s Name** (as per registration documents) |  |
| **Company Authorized Representative’s Name**(as per registration documents or duly signed Power of Attorney) |  |
| **Company Registration Number** |  |
| **Registration body** |  |
| **Company’s mailing address**Shop/Office/Building NoStreet nameCityGovernorate/province/districtCountry |  |
| **Commercial representative for the bid** (if different from authorized representative) |  |
| **Phone contact number**LandlineMobile No |  |
| **Email address** |  |

I undersigned (to be filled in by Bidders) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

agree to provide ACTED, non-profit NGO, with items answering the following specifications, according to the general conditions and responsibilities that I engage myself to follow.

**Unit and Total prices must be inclusive of all costs (accommodation, travel, per diem, applicable taxes, etc.).**

**Please attach any technical proposal as per attached terms of reference.**

**Lot 1:**

|  |  |  |
| --- | --- | --- |
|  | **To be filled in by ACTED** |  |
| **N°** | **Deliverable** | **Detail the related past performance sample required**  | [[1]](#footnote-1)Unit[1] | **Quantity** | **Unit Price excluding taxes** | **Unit Price including all costs & taxes** | **Total Price excluding taxes** | **Total Price including all costs & taxes** |
| **-1** | ***USD*** | ***USD*** | ***USD*** | ***USD*** |
|   | **-2** | **-3** | **(1) x (2)** | **(1) x (3)** |
| 1 | Consultency Service to finalize Mid-Term Evaluation Report for KfW-funded livelihoods project (as per attached TOR’s) |  As per TOR’s | Consultancy | 1 |   |   |   |   |
| **Total Price** ***USD*** |   |   |

**Delivery conditions:**

**As per Detailed given in TOR’s**

|  |  |  |
| --- | --- | --- |
|  | **Delivery conditions requested by ACTED** | **Delivery conditions offered by the Bidder** (if different) |
| **Delivery date**(either X days/months from contract signature or fixed date DD/MM/YYYY) | **As per TOR’s** |  |

**Bidder’s Conditions:**

|  |  |  |
| --- | --- | --- |
|  | **General conditions recommended by ACTED** | **General conditions offered by the Bidder** (if different) |
| **Validity of the offer** | *3 months min; ideally 6 months* |  |
| **Terms of payment** | **Online Bank Transfer** |  |

Name of Bidder’s Authorized Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized signature and stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Instruction to Bidders**

* Kindly fill in the required fields of above mention tables.
* **All Pages of this quotation must be duly signed, stamped and dated.**

**Scanned copy of quotation (Sign & Stamp) should be submitted on email not later than 10th of January 2024, before 2:00 pm**  to imtiaz.karim@acted.org cc jaguru.jenneth@acted.org & south-sudan.tender@acted.org .

* Kindly do mention reference number in the subject of your email.
* Please mention all details as requested, incomplete quotation would not be considered.
* Please contact imtiaz.karim@acted.org cc jaguru.jenneth@acted.org , contact number Call **Cell +211 920100070, WA: +92 3233333423**

**Kindly fill below table for Bank information:**

|  |  |
| --- | --- |
| **Beneficiary Bank** |  |
| Name of the bank |  |
| Bank address |  |
| SWIFT |  |
| **Beneficiary** |  |
| Beneficiary's name |  |
| Account number |  |
| IBAN |  |

1. [↑](#footnote-ref-1)