## **ANNEX 3: TECHNICAL AND FINANCIAL OFFER - SERVICES – LOT 2**

*Bidders are requested to complete this form, sign it and return it as part of their quotation along with Annex 2 Quotation Submission Form. 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.*

|  |  |
| --- | --- |
| Name of Bidder: | Click or tap here to enter text. |
| RFQ reference: | **RfQ22/02477** | Date: Click or tap to enter a date. |

**Technical Offer**

*Provide the following:*

* *a brief description of your qualification, capacity and expertise that is relevant to the Terms of Reference;*
* *a brief methodology, approach and implementation plan;*
* *team composition and CVs of key personnel.*

**Financial Offer**

Provide a lump sum for the provision of the services stated in the Terms of Reference your technical offer. The lump sum should include all costs of preparing and delivering the Services.

**Currency of Quotation: USD**

|  |  |  |
| --- | --- | --- |
| **Ref** | **Description of Deliverables** | **Price** |
| 1. | **Deliverable 1:** Study tour concept and methodology. Preliminary report to study tour, including detailed agenda and logistic note. |  |
| 2. | **Deliverable 2:** Endorsed Final Study Visit Agenda. Study Visit in **Estonia – Sweden** conducted. Copies of the legislative and internal regulations regarding the activity of OSS and templates of OSS operation models, used softs for internal document management systems - provided. |  |
| 3. | **Deliverable 3:** Final Report |  |
| **Total Price** |  |

**Breakdown of Fees**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Personnel / other elements** | **UOM** | **Qty** | **Unit Price** | **Total Price** |
| Personnel |  |  |  |  |
| 1 (one) Project and study visits coordinator  | day |  |  |  |
| 1 (one) Project coordinator assistant, expert in the area of local public administration and public services delivery at local level.  | day |  |  |  |
| 1 (one) Project coordinator assistant, expert in the area of local public administration and public services delivery at local level. | day |  |  |  |
| Other expenses |  |  |  |  |
| Accommodation in a minimum 3-star hotel (4 nights, Single numbers, with breakfast included) for **7** representatives | night | 4\*7=**28** |  |  |
| Refreshments (4 days, 2 coffee breaks per working day) for **7** representatives | unit | 4\*2\*7=**56** |  |  |
| Lunch and dinner (4 days, 2 meals per day) for **7** representatives | unit | 4\*2\*7=**56** |  |  |
| Per-diem (first and last day of the trip for participants according to Moldovan Legislation rates) for **6** representativesThe Programme will cover per-diem for 1 (one) UNDP representative | unit | 2\*6=**12** |  |  |
| Insurance for **7** study tour participants | unit | **7** |  |  |
| Translation/ Interpretation (8 hours per day, 4 days) | hour | 8\*4=**32** |  |  |
| Local transportation costs | km |  |  |  |
| Other Costs: (please specify) |  |  |  |  |
| **Total**  |  |  |  |  |

**Compliance with Requirements**

|  |  |
| --- | --- |
| **Requirements** | **Your Responses** |
|  | **Yes, we will comply** | **No, we cannot comply** | **If you cannot comply, pls. indicate counter - offer** |
| Delivery Lead Time |[ ] [ ]  Click or tap here to enter text. |
| Validity of Quotation |[ ] [ ]  Click or tap here to enter text. |
| Payment terms |[ ] [ ]  Click or tap here to enter text. |
| Full acceptance of the Contract General Terms and Conditions |[ ] [ ]  Click or tap here to enter text. |
| Other requirements [pls. specify] |[ ] [ ]  Click or tap here to enter text. |

|  |
| --- |
| I, the undersigned, certify that I am duly authorized to sign this quotation and bind the company below in event that the quotation is accepted. |
| *Exact name and address of company*Company NameClick or tap here to enter text.Address: Click or tap here to enter text. Click or tap here to enter text.Phone No.: Click or tap here to enter text.Email Address: Click or tap here to enter text. | Authorized Signature: Date: Click or tap here to enter text.Name: Click or tap here to enter text.Functional Title of Authorised Signatory: Click or tap here to enter text.Email Address: Click or tap here to enter text. |