**RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions.**

# SECTION 7: PROPOSAL FORMS

**Form A: Proposal Confirmation**

**Form B: Checklist**

**Form C: Technical Proposal Submission**

**Form D: Proposer Information**

**Form E: Joint Venture/Consortium/Association Information**

**Form F: Eligibility and Qualification**

**Form G: Format for Technical Proposal**

**Form H: Format for CV of Proposed Key Personnel**

**Form I: Statement of Exclusivity and Availability**

**Form J: Financial Proposal Submission** *[Form J is part of the Financial Proposal and shall be submitted directly in the system only in the “Commercial section” of the requirements. Please, ensure that no other documents are disclosing your financial proposal apart from Forms J and K. Non-compliance with this instruction may result in rejection of the proposal received.]*

**Form K: Format for Financial Proposal** *[Forms K is part of the Financial Proposal and shall be submitted directly in the system only in the “Commercial section” of the requirements. Please, ensure that no other documents are disclosing your financial proposal apart from Forms J and K. Non-compliance with this instruction may result in rejection of the proposal received.]*

## FORM A: PROPOSAL CONFIRMATION

Please acknowledge receipt of this RFP by completing this form and returning it by email to the address, and by the date specified, in the Letter of Invitation.

|  |  |  |
| --- | --- | --- |
| To: | Insert name of contact person | Email: Insert contact person’s email - do not enter secure proposal email address |
| From: | Insert name of proposer |  |
| Subject | RFP reference: RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | |

|  |  |
| --- | --- |
| **Check the appropriate box** | **Description** |
|  | **YES**, we intend to submit a proposal. |
|  | **NO**, we are unable to submit a competitive proposal for the requested services at the moment |

If you selected NO above, please state the reason(s) below:

|  |  |
| --- | --- |
| **Check applicable** | **Description** |
|  | The requested services are not within our range of supply |
|  | We are unable to submit a competitive proposal for the requested services at the moment |
|  | The requested services are not available at the moment |
|  | We cannot meet the requested terms of reference |
|  | The information provided for proposal purposes is insufficient |
|  | Your RFP is too complicated |
|  | Insufficient time is allowed to prepare a proposal |
|  | We cannot meet the delivery requirements |
|  | We cannot adhere to your terms and conditions e.g. payment terms, request for performance security, etc. Please provide details below. |
|  | Sustainability criteria/requirements are too stringent (if applicable) |
|  | We do not export |
|  | We do not sell to the UN |
|  | Your requirement is too small |
|  | Our capacity is currently full |
|  | We are closed during the holiday season |
|  | We had to give priority to other clients’ requests |
|  | The person handling proposals is away from the office |
|  | Other (please provide reasons below): |
| Further information: Click or tap here to enter text. | |
|  | We would like to receive future RFPs for this type of services |
|  | We don’t want to receive RFPs for this type of services |

Questions to the Supplier concerning the reasons for no proposal should be addressed to Click or tap here to enter text. phone Click or tap here to enter number., email Click or tap here to enter text..

## FORM B: CHECKLIST

This form serves as a checklist for preparation of your Proposal. Please complete the returnable Proposal Forms in accordance with the instructions and return them as part of your Proposal submission: No alteration to the format of forms shall be permitted and no substitution shall be accepted.

Before submitting your Proposal, please ensure compliance with the instructions in Section 2: Instructions to Proposers and Section 3: Data Sheet.

**Technical Proposal:**

|  |  |
| --- | --- |
| **Have you duly completed all the Returnable Proposal Forms?** |  |
| * Form C: Technical Proposal Submission |  |
| * Form D: Proposer information |  |
| * Form E: Joint Venture/Consortium/Association Information |  |
| * Form F: Eligibility and Qualification |  |
| * Form G: Technical Proposal |  |
| * Form H: CVs of proposed key personnel |  |
| * Form I: Statements of exclusivity and availability for key personnel |  |
| **Have you provided the required documents to establish compliance with the evaluation criteria in Section 4?** |  |
| **Have you provided the required documents in support of Form D: Proposer Information?** |  |

**Financial Proposal:**

|  |  |
| --- | --- |
| * Form J: Financial Proposal Submission |  |
| * Form K: Financial Proposal |  |

Forms J and K, representing the Financial Proposal shall be submitted directly in the system only in the “Commercial section” of the requirements. Please, ensure that no other documents are disclosing your financial proposal apart from Forms J and K. Non-compliance with this instruction may result in rejection of the proposal received.

## FORM C: TECHNICAL PROPOSAL SUBMISSION

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

We, the undersigned, offer to supply the services required for UNDP Moldova in accordance with your Request for Proposals No. ***RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions***. We hereby submit our Proposal, which includes this Technical Proposal and our Financial Proposal uploaded separately under the commercial section in the system as instructed.

**Proposer Declaration:** on behalf of our firm, its affiliates, subsidiaries and employees, including any JV / Consortium / Association members or subcontractors or suppliers for any part of the contract.

| **Yes** | **No** |  |
| --- | --- | --- |
|  |  | **Requirements and Terms and Conditions:** I/We have read and fully understand the RFP, including the RFP Information and Data Sheet, Terms of Reference, the General Conditions of Contract and any Special Conditions of Contract. I/we confirm that the proposer agrees to be bound by them. |
|  |  | I/We confirm that the proposer has the necessary capacity, capability and necessary licenses to fully meet or exceed the requirements and will be available to deliver throughout the relevant contract period. |
|  |  | **Ethics**: In submitting this proposal I/we warrant that the proposer: has not entered into any improper, illegal, collusive or anti-competitive arrangements with any competitor; has not directly or indirectly approached any representative of the buyer (other than the point of contact) to lobby or solicit information in relation to the RFP; has not attempted to influence, or provide any form of personal inducement, reward or benefit to any representative of the buyer. |
|  |  | I/We confirm to undertake not to engage in proscribed practices, or any other unethical practice, with the UN or any other party, and to conduct business in a manner that averts any financial, operational, reputational or other undue risk to the UN and we have read the United Nations Supplier Code of Conduct :<https://www.un.org/Depts/ptd/about-us/un-supplier-code-conduct> and acknowledge that it provides the minimum standards expected of suppliers to the UN. |
|  |  | **Conflict of interest:** I/We warrant that the proposer has no actual, potential or perceived conflict of Interest in submitting this proposal, or entering into a contract to deliver the requirements. Where a conflict of interest arises during the RFP process the proposer will report it immediately to the Procuring Organisation’s Point of Contact. |
|  |  | **Prohibitions, Sanctions:** l/We hereby declare that our firm, its affiliates or subsidiaries or employees, including any JV/Consortium members or subcontractors or suppliers for any part of the contract is not under procurement prohibition by the United Nations, including but not limited to prohibitions derived from the Compendium of United Nations Security Council Sanctions Lists and have not been suspended, debarred, sanctioned or otherwise identified as ineligible by any UN Organization or the World Bank Group. |
|  |  | I/We do not employ, or anticipate employing, any person(s) who is, or has been a UN staff member within the last year, if said UN staff member has or had prior professional dealings with our firm in his/her capacity as UN staff member within the last three years of service with the UN (in accordance with UN post-employment restrictions published in ST/SGB/2006/15); |
|  |  | **Bankruptcy**: l/We have not declared bankruptcy, are not involved in bankruptcy or receivership proceedings, and there is no judgment or pending legal action against us that could impair our operations in the foreseeable future. |
|  |  | **Proposal Validity Period:** I/We confirm that this Proposal, including the price, remains open for acceptance for the proposal validity period. |
|  |  | I/We understand and recognize that you are not bound to accept any proposal you receive. |
|  |  | By signing this declaration, the signatory below represents, warrants and agrees that he/she has been authorised by the Organisation/s to make this declaration on its/their behalf. |

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

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

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

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

[*Stamp with official stamp of the Proposer*]

## FORM D: PROPOSER INFORMATION

|  |  |
| --- | --- |
| **RFP Reference** | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. |
| **Legal name of Proposer** | Click or tap here to enter text. |
| **Legal Address, City, Country** | Click or tap here to enter text. |
| **Website** | Click or tap here to enter text. |
| **Year of registration** | Click or tap here to enter text. |
| **Proposer’s Authorized Representative information** | Name and Title: Click or tap here to enter text.  Telephone numbers: Click or tap here to enter text.  Email: Click or tap here to enter text. |
| **Legal structure** | Choose an item. |
| **No. of full-time employees** | Click or tap here to enter number. |
| **No. of staff involved in similar contracts** | Click or tap here to enter number. |
| **Are you a UNGM registered vendor?** | Yes  No If yes, insert UNGM Vendor Number |
| **Years of supplying to UN organisations** | Click or tap here to enter text. |
| **Are you a** Click or tap here to enter text.**vendor?** | Yes  No If yes, insert Vendor Number |
| **Countries of operation** | Click or tap here to enter text. |
| **Subsidiaries in the region (please indicate names of subsidiaries and addresses, if relevant to the proposal)** | Click or tap here to enter text. |
| **Commercial Representatives in the country: Name/Address/Phone (for international companies only)** | Click or tap here to enter text. |
| **Quality Assurance Certification (e.g. ISO 9000 or Equivalent)** *(If yes, provide a Copy of the valid Certificate):* | Click or tap here to enter text. |
| **Does your Company have a corporate environmental policy or environmental management system/accreditation such as ISO 14001 or ISO 14064 or equivalent?** *(If yes, provide a Copy of the valid Certificate):* | Tick all that apply and **provide supporting documentation**:  Corporate Environmental Policy  ISO 14001  ISO 14064  Other, specify Click or tap here to enter text. |
| **Does your organization demonstrate significant commitment to sustainability, including the following aspects that have been identified in the UN Sustainable Procurement Framework?**   * **Environmental: prevention of pollution, sustainable resources; climate change and mitigation and the protection of the environment, biodiversity.** * **Social: human rights and labour issues, gender equality, sustainable consumption, and social health and wellbeing.** * **Economic: whole life cycle costing, local communities and small or medium enterprises, and supply chain sustainability.** | Attach a formal statement that outlines your organisation’s commitment to sustainability, where possible providing evidence of tangible results that demonstrate progress such as:  Tick all that are attached:  Formal statement  Sustainability report  UN Global Compact Communication on Progress  Other, specify Click or tap here to enter text. |
| **Does your company belong to a diverse supplier group including micro, small or medium sized enterprise, women or youth owned business or other?**  *(If yes, please provide details and documentation]* | Click or tap here to enter text. |
| **Is your company a member of the UN Global Compact?** | Choose an item.  If yes, please provide link to Global Compact profile:  Click or tap here to enter text. |
| **Bank Information** | Bank Name: Click or tap here to enter text.  Bank Address: Click or tap here to enter text.  IBAN: Click or tap here to enter text.  SWIFT/BIC: Click or tap here to enter text.  Account Currency: Click or tap here to enter text.  Bank Account Number: Click or tap here to enter text. |
| **Contact person that** Click or tap here to enter text. **may contact for requests for clarifications during Proposal evaluation** | Name and Title: Click or tap here to enter text.  Telephone numbers: Click or tap here to enter text.  Email: Click or tap here to enter text. |

## FORM E: JOINT VENTURE/CONSORTIUM/ASSOCIATION INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

To be completed and returned with your Proposal if the Proposal is submitted as a Joint Venture/Consortium/Association.

|  |  |  |
| --- | --- | --- |
| **No** | **Name of Partner and contact information** *(address, telephone numbers, fax numbers, e-mail address)* | **Proposed proportion of responsibilities (in %) and type of services to be performed** |
| 1 | Click or tap here to enter text. | Click or tap here to enter text. |
| 2 | Click or tap here to enter text. | Click or tap here to enter text. |
| 3 | Click or tap here to enter text. | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Name of leading partner**  (with authority to bind the JV, Consortium, Association during the RFP process and, in the event a Contract is awarded, during contract execution) | Click or tap here to enter text. |

We have attached a copy of the below referenced document signed by every partner, which details the likely legal structure of and the confirmation of joint and severable liability of the members of the said joint venture:

Letter of intent to form a joint venture ***OR***  JV/Consortium/Association agreement

We hereby confirm that if the contract is awarded, all parties of the Joint Venture/Consortium/Association shall be jointly and severally liable to Click or tap here to enter text for the fulfilment of the provisions of the Contract.

|  |  |
| --- | --- |
| Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

## FORM F: ELIGIBILITY AND QUALIFICATION

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

***If JV/Consortium/Association, to be completed by each partner.***

**History of Non- Performing Contracts**

|  |  |  |  |
| --- | --- | --- | --- |
| No non-performing contracts during the last 3 years | | | |
| Contract(s) not performed in the last 3 years | | | |
| **Year** | **Non- performed portion of contract** | **Contract Identification** | **Total Contract Amount** (current value in US$) |
|  |  | Name of Client:  Address of Client:  Reason(s) for non-performance: |  |

**Litigation History** (including pending litigation)

|  |  |  |  |
| --- | --- | --- | --- |
| No litigation history for the last 3 years | | | |
| Litigation History as indicated below | | | |
| **Year of dispute** | **Amount in dispute** (state currency) | **Contract Identification** | **Total Contract Amount** (state currency) |
|  |  | Name of Client:  Address of Client:  Matter in dispute:  Party who initiated the dispute:  Status of dispute:  Party awarded if resolved: |  |

**Previous Relevant Experience**

Please list only previous similar assignments successfully completed in the **last 5 years**.

List only those assignments for which the Proposer was legally contracted or sub-contracted by the Client as a company or was one of the Consortium/JV partners. Assignments completed by the Proposer’s individual experts working privately or through other firms cannot be claimed as the relevant experience of the Proposer, or that of the Proposer’s partners or sub-consultants, but can be claimed by the Experts themselves in their CVs. The Proposer should be prepared to substantiate the claimed experience by presenting copies of relevant documents and references if so requested.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Project name & Country of Assignment** | **Client & Reference Contact Details** | **Contract Value** | **Period of activity and status** | **Types of activities undertaken and role (Contractor, sub-contractor or consortium member)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*Proposers may also attach their own Project Data Sheets with more details for assignments above.*

Attached are the Statements of Satisfactory Performance from the Top 3 (three) Clients or more.

**Financial Standing**

|  |  |  |  |
| --- | --- | --- | --- |
| **Annual Turnover for the last 3 years** | Year 2021 | Currency | Amount |
| Year 2020 | Currency | Amount |
| Year 2019 | Currency | Amount |
| **Latest Credit Rating (if any), indicate the source and date.** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Financial information**  (state currency) | **Historic information for the last 3 years** | | |
|  | 2021 | 2020 | 2019 |
|  | *Information from Balance Sheet* | | |
| Total Assets (TA) |  |  |  |
| Total Liabilities (TL) |  |  |  |
| Current Assets (CA) |  |  |  |
| Current Liabilities (CL) |  |  |  |
|  | *Information from Income Statement* | | |
| Total / Gross Revenue (TR) |  |  |  |
| Profits Before Taxes (PBT) |  |  |  |
| Net Profit |  |  |  |
| Current Ratio (current assets/current liabilities) |  |  |  |

 Attached are copies of the audited financial statements (balance sheets, including all related notes, and income statements) for the years required above complying with the following condition:

* 1. Must reflect the financial situation of the Proposer or party to a JV, and not sister or parent companies;
  2. Historic financial statements must be audited by a certified public accountant;
  3. Historic financial statements must correspond to accounting periods already completed and audited. No statements for partial periods shall be accepted.

## FORM G: FORMAT FOR TECHNICAL PROPOSAL

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

The proposer’s proposal must be organised to follow the format of this Technical Proposal Form. Where the proposer is presented with a requirement or asked to use a specific approach, the proposer must not only state its acceptance, but also describe, where appropriate, how it intends to comply. Where a descriptive response is requested, failure to provide the same will be viewed as non-responsive.

**Section 1: Proposer’s qualification, capacity and expertise**

1.1 Brief description of the organisation, including the year and country of incorporation, and types of activities undertaken.

1.2 General organizational capability which is likely to affect implementation: management structure, financial stability and project financing capacity, project management controls, extent to which any work would be subcontracted (if so, provide details).

1.3 Relevance of specialised knowledge and experience on similar engagements done in the region/country.

1.4 Quality assurance procedures and risk mitigation measures.

1.5 Organization’s commitment to sustainability.

**Section 2: Proposed Methodology, Approach and Implementation Plan**

This section should demonstrate the proposer’s responsiveness to the TOR by identifying the specific components proposed, addressing the requirements, providing a detailed description of the essential performance characteristics proposed and demonstrating how the proposed approach and methodology meets or exceeds the requirements. All important aspects should be addressed in sufficient detail and different components of the project should be adequately weighted relative to one another.

2.1 A detailed description of the approach and methodology for how the Proposer will achieve or exceed the requirements of the Terms of Reference, keeping in mind the appropriateness to local conditions and project environment. Detail how the different service elements shall be organised, controlled and delivered.

2.2 Provide comments and suggestions on the Terms of Reference: have the important aspects of the task been addressed in sufficient detail? Are the different components of the project adequately weighted relative to one another? Include additional services that will be rendered beyond the requirements of the ToR, if any.

2.3 The methodology shall also include:

- details of the Proposer’s internal technical and quality assurance review mechanisms;

- details of the advanced training program to be developed related to cluster functionality;

- details on how support for the elaboration of technical specifications for the purchase of equipment, goods, and services, will be provided to the beneficiaries.

2.4 Explain whether any work would be subcontracted, to whom, how much percentage of the work, the rationale for such, and the roles of the proposed sub-contractors and how everyone will function as a team.

2.5 Description of available performance monitoring and evaluation mechanisms and tools; how they shall be adopted and used for a specific requirement.

2.6 Implementation plan including a Gantt chart or Project Schedule indicating the detailed sequence of activities that will be undertaken and their corresponding timing.

2.7 Any other comments or information regarding the project approach and methodology that will be adopted.

**Section 3: Management Structure and Key Personnel**

3.1 Describe the overall management approach toward planning and implementing the project. Include details of key personnel including their name and nationality, the Position they will assume and their role as per the ToR. Include an organisation chart for the management of the project describing the relationship of key positions and designations. Provide a spreadsheet to show the activities of each personnel and the time allocated for his/her involvement.

3.2 For each of the key personnel provide: the CV using the format in Form H and the statement of exclusivity and availability using the format in Form I.

**FORM H: FORMAT FOR CV OF PROPOSED KEY PERSONNEL**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

|  |  |  |
| --- | --- | --- |
| **Position (as per ToR)** |  | |
| **Personnel Information** | Name: | |
|  | Nationality: | Date of birth: |
|  | Language Proficiency: | |
| **Present Employment** | Name of employer: | Contact: (manager or HR) |
|  | Address of employer: | |
|  | Telephone: | Email: |
|  | Job title: | Years with present employer: |
| **Education / Qualifications** | *Summarise college/university and other specialised 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 including name of institution and date of certification.* | |
| **References:** | *Provide names, addresses, phone and email contact information for two (2) references*. | |

Summarise professional experience over the last 20 years in reverse chronological order. Indicate particular technical and managerial experience relevant to the project.

|  |  |  |
| --- | --- | --- |
| **From** | **To** | **Company / Project / Position / Relevant technical and management experience** |
|  |  |  |

I, the undersigned, certify that, to the best of my knowledge and belief, this CV is accurate.

Signature of Personnel Date (Day/Month/Year)

**FORM I: STATEMENT OF EXCLUSIVITY AND AVAILABLITY**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

I, the undersigned, hereby declare that I agree to participate exclusively with the Proposer Click or tap here to enter text.in the above referenced RFP. I further declare that I am able and willing to work for the period(s) foreseen for the position for which my CV has been included in the event that this proposal is successful, namely:

|  |  |
| --- | --- |
| **From** | **To** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

I confirm that I am not engaged in other projects in a position for which my services are required during the periods where my services are required under this RFP.

By making this declaration, I understand that I am not allowed to present myself as a candidate to any other proposer submitting a proposal for this RFP. I am fully aware that if I do so, I will be excluded from this RFP, the proposals may be rejected, and I may also be subject to exclusion from other UNDP’s solicitation procedures and contracts.

Furthermore, should this proposal be successful, I am fully aware that if I am not available at the expected start date of my services for reasons other than ill-health or *force majeure*, I may be subject to exclusion from other Click or tap here to enter text. solicitation procedures and contracts and that the notification of award of contract to the Proposer may be rendered null and void.

Name:

Title:

Date:

Signature:

## FORM J: FINANCIAL PROPOSAL SUBMISSION

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

We, the undersigned, offer to provide the services indicated in our proposal and in accordance with your Request for Proposal. We are hereby submitting our Financial Proposal in the amount indicated herewith.

Our Proposal shall be valid and remain binding upon us for the period of time specified in the Data Sheet.

We understand that you are not bound to accept any Proposal that you receive.

**Our attached Financial Proposal is for the sum of *[Insert amount in words and figures]*.** Please make sure the total matches with the total indicated in the deliverables section of the system (lines) and with the total deriving from the cost breakdown (form K).

## FORM K: FORMAT FOR FINANCIAL PROPOSAL

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Proposer: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |
| RFP reference: | RFP No.: 22/02494: EU4MD/ Technical Assistance related to the successful implementation of Non-Reimbursable Financial Assistance Program for clusters in the Focal Regions. | | |

The proposer is required to prepare the Financial Proposal following the below format and submit it in an envelope separate from the Technical Proposal (Forms A-I) as indicated in the Instruction to Proposers. **The inclusion of any financial information in the Technical Proposal (Forms A-I) shall lead to disqualification of the Proposer.** The Financial Proposal should align with the requirements of the Terms of Reference and the proposer’s Technical Proposal.

**Currency of the proposal: US Dollars**

**Table 1: Breakdown of Price per Deliverable / Activity**

|  |  |  |  |
| --- | --- | --- | --- |
| **Deliverable / Milestone**  **as per Terms of Reference** | **Percentage of the Total Price** | **Target Date for Payment** | **Price**  **(Lump Sum, All Inclusive)** |
| Milestone 1  (related to successful completion of Deliverables 1 & 2) | **30%** | by 16 December 2022 |  |
| Milestone 2  (related to successful completion of Deliverables 3 - 5) | **30%** | by 31 March 2023 |  |
| Milestone 3  (related to successful completion of Deliverables 6&7) | **40%** | by 27 January 2024 |  |
| **Total Amount of Financial Proposal (all-inclusive, VAT 0%)** | | |  |

**Table 2: Breakdown by Cost Component**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description of Activity** | **Unit of measure (day, unit etc.)** | **Quantity** | **Unit Price in US$** | **Total Price in US$ per budget line** |
| *A* | *B* | *C=A\*B* |
| 1. **Personnel Services** |  |  |  |  |
| 1. Team Leader | Working days |  |  |  |
| 1. Marketing Expert | Working days |  |  |  |
| 1. Sales Expert | Working days |  |  |  |
| 1. Agribusiness Expert | Working days |  |  |  |
| 1. Tourism Expert | Working days |  |  |  |
| 1. Finance Expert | Working days |  |  |  |
| 1. Other staff if necessary *(please specify)* | Working days |  |  |  |
| **Subtotal Personnel Services:** | | | |  |
| 1. **Out of Pocket Expenses** |  |  |  |  |
| 1. Transportation costs |  |  |  |  |
| Local transportation costs to Cahul | Trip |  |  |  |
| Local transportation costs to Ungheni | Trip |  |  |  |
| 1. Other Costs: *(please specify)* |  |  |  |  |
| **Subtotal Out of Pocket Expenses:** | | | |  |
| 1. **Other Related Costs** |  |  |  |  |
| Other Costs: *(please specify)* |  |  |  |  |
|  |  |  |  |  |
| **Subtotal Other Related Costs:** | | | |  |
| **TOTAL (all-inclusive, VAT 0%)** | | | |  |