ANNEX III

OFFEROR'S LETTER TO UNDP CONFIRMING INTEREST AND AVAILABILITY FOR THE INDIVIDUAL CONTRACTOR (IC) ASSIGNMENT

| Date | |
|------|--|
| | |

Robert Watkins
Resident Representative
United Nations Development Programme
Arab African International Bank Building
Riad El Solh Street, Nejmeh, Beirut 2011 5211
P.O. Box 11-3216 Beirut, Lebanon

Dear Sir/Madam:

I hereby declare that:

- a) I have read, understood and hereby accept the Terms of Reference describing the duties and responsibilities of Project Evaluator under the Community Energy Efficiency and Renewable Energy Demonstration Project for the Recovery of Lebanon" (CEDRO II);
- b) I have also read, understood and hereby accept UNDP's General Conditions of Contract for the Services of the Individual Contractors;
- c) I hereby propose my services and I confirm my interest in performing the assignment through the submission of my CV or Personal History Form (P11) which I have duly signed and attached hereto as Annex 1;
- d) In compliance with the requirements of the Terms of Reference, I hereby confirm that I am available for the entire duration of the assignment, and I shall perform the services in the manner described in my proposed approach/methodology which I have attached hereto as Annex 3;
- e) I hereby propose to complete the services based on the following payment rate:



| | | An all-incluindicating currency, | • | of state amount in words | and in numb | CTS |
|----|---------|--|---|--|----------------------|--------------------|
| f) | - | ur evaluation, the br as Annex 2; | eakdown of th | e abovementioned all-inc | clusive amour | nt is attached |
| g) | deliver | y of outputs within | the timeframe | mentioned amounts due to e specified in the TOR, certification procedures; | | • |
| h) | This of | fer shall remain valid | d for a total per | riod of 90 days after the s | ubmission de | adline; |
| i) | brother | or sister) currently (e. the UN office emp | employed with | tive (mother, father, son, any UN agency or office ative. and the relationship | e (disclose the | name of the |
| j) | If I am | selected for this assi | gnment, I shal | 1 [pls. check the appropri | ate box/: | |
| k) | I hereb | UNDP a Reimbursa person and details o | ble Loan Agre f my employer k all that apple s submission, I | have no active Individua | my behalf. Tollows: | The contact |
| | | I am currently enga | aged with UNI | OP and/or other entities for | or the followir | ig work: |
| | | Assignment | Contract Type | UNDP Business Unit / Name of Institution/Company | Contract Duration | Contract Amount |
| | | | | | | |
| | | | İ | | | |



| | Assignment | Contract Type | Name of Institution/ Company | Contract Duration | Contract Amount |
|------------------------|---|---|--|---|---|
| | | | | | |
| unders submis of the o | understand and recognized and and accept that ession and that UNDP conduct or outcome of the area former staff in to your letter: I he required before I can | t I shall bear will in no case be the selection properties of the U ereby confirm the | all costs associate responsible or liable costs. Inited Nations recent that I have complies | ed with its prable for those contents separated d with the mini | eparation ar ests, regardle of, pls. add th |
| n) I also | fully understand that ations nor entitlement | at, if I am eng | aged as an Indiv | vidual Contracto | or, I have istaff membe |
| Full Name | and Signature: | | Date S | igned : | |

BREAKDOWN OF COSTS SUPPORTING THE ALL-INCLUSIVE FINANCIAL PROPOSAL

A. Breakdown of Cost by Components:

| Cost Components | Unit Cost US\$ | Quantity | Total Rate for the Contract Duration US\$ |
|--|----------------------|-----------------------|--|
| | | | |
| I. Personnel Costs | | | |
| Professional Fees | | 12 Working Days | |
| Life Insurance | | | |
| Medical Insurance | | | |
| Communications | | | |
| Land Transportation | | | |
| Others (pls. specify) | | | |
| II. Travel Expenses to Join duty station | | | |
| Round Trip Airfares to and from | | | |
| duty station Living Allowance | | | |
| Travel Insurance | | | |
| Terminal Expenses | | | |
| Others (pls. specify) | | | |
| III.Duty Travel | | | |
| Round Trip Airfares | | | |
| Living Allowance | | | |
| Travel Insurance | | | |
| Terminal Expenses | | | |
| Others (pls. specify) | | | |
| Total | | | USD |

