ANNEX III

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

Date			
Celine Moyroud 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			
ar Sir/Madam:			
ereby declare that:			
I have read, understood and hereby accept the Terms of Reference describing the duties and responsibilities of an International communications Advisor to the Resident Coordinator for Lebanon under UN Resident Coordinator System – No. 116769.			
I have also read, understood and hereby accept UNDP's General Conditions of Contract for the Services of the Individual Contractors;			
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;			
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;			
I hereby propose to complete the services based on the following payment rate: [pls. check the box corresponding to the preferred option]:			
An all-inclusive daily fee of [state amount in words and in numbers indicating currency]			

		Assignment	Contract Type	UNDP Business Unit / Name of Institution/Company	Contract Duration	Contract Amount
		I am currently engage	d with UNDP an	d/or other entities for th	ne following wo	ork :
			submission, 1	have no active Individo f UNDP;	ual Contract o	r any form of
k)	I hereb	y confirm that <i>[check ali</i>	that applies]:			
			[state name of c greement (RLA)	company/organization/ir , for and on my behalf.		
j)	If I am	selected for this assignm	nent, I shall <mark>[pls</mark> .	check the appropriate b	ox]:	
i)	I confirm that I have no first degree relative (mother, father, son, daughter, spouse/partner, brother or sister) currently employed with any UN agency or office [disclose the name of the relative, the UN office employing the relative, and the relationship if, any such relationship exists];					
h)	This offer shall remain valid for a total period of 90 days after the submission deadline;					
g)	I recognize that the payment of the abovementioned amounts due to me shall be based on my delivery of outputs within the timeframe specified in the TOR, which shall be subject to UNDP's review, acceptance and payment certification procedures;					
f)	For your evaluation, the breakdown of the abovementioned all-inclusive amount is attached hereto as Appendix a;					

		Assignment	Contract Type	Name of Institution/ Company	Contract Duration	Contract Amount
m) <u>i</u>	and accept will in no c selection p If you are o your letter	erstand and recognize that I shall bear all case be responsible or occess. a former staff member of the process of the proces	costs associated r liable for those er of the United at I have complie	with its preparation costs, regardless of Nations recently se	and submission f the conduct or parated, pls. ad	and that UND outcome of th
	-	understand that, if I				expectations no
	Harassmer efore, I co	ommitted to provide at, Sexual Harassment of I am eng are online BSAFE traini	t, Discrimination, aged as an Indivi ng course (ca. 2 h	and Abuse of Authodual Contractor, bef	ority. Fore signing the c raining course (c	contract, I will ca. 90 min) on
Ther have prev	ention of s	ps://agora.unicef.org				

I)

Annexes [pls. check all that applies]:
Duly signed P11 Form, in addition to at least 3 References' e-mails addresses
Breakdown of Costs Supporting the Final All-Inclusive Price as per Template
Brief Description of Approach to Work (if required by the TOR)

APPENDIX a

BREAKDOWN OF COSTS SUPPORTING THE ALL-INCLUSIVE FINANCIAL PROPOSAL

A. Breakdown of Cost by Components:

Cost Components	Unit Cost	Quantity In days	Total Rate for the Contract Duration
I. Personnel Costs			
		40 working	
Professional Fees		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)			

Full Name and Signature:	Date Signed: