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| **ANNEX 2****OFFEROR’S LETTER TO UNDP****CONFIRMING INTEREST AND AVAILABILITY** **FOR THE INDIVIDUAL CONTRACTOR (IC) ASSIGNMENT** Date   *Dear Sir/Madam*United Nations Development Programme*Regional Centre for Latin America and the Caribbean*Dear Sir/Madam:I hereby declare that:1. I have read, understood and hereby accept the Terms of Reference describing the duties and responsibilities of

**17307 RSC 2020 – Inputs for Chapter 3 of the Regional Human Development Report**;1. I have also read, understood and hereby accept UNDP’s General Conditions of Contract for the Services of the Individual Contractors;

 1. 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;
2. I hereby propose the following payment rate:
* A lump-sum fee of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ US dollars *[state amount in words and in numbers] for Product 1;* **PLEASE NOTE THAT THE LUMP-SUM FEE STATED IN THIS SECTION SHOULD BE IDENTICAL TO THAT DECLARED ON THE TABLE BELOW OF BREAKDOWN OF COSTS**

Or, alternatively:* A lump-sum fee of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ US dollars *[state amount in words and in numbers] for Products 1 and 2;* **PLEASE NOTE THAT THE LUMP-SUM FEE STATED IN THIS SECTION SHOULD BE IDENTICAL TO THAT DECLARED ON THE TABLE BELOW OF BREAKDOWN OF COSTS**
1. For your evaluation, the breakdown of the abovementioned all-inclusive amount is attached hereto as Annex 2;
2. I recognize that the payment of the abovementioned amounts due to me shall be based on my delivery of outputs within the timeframe of specified in the TORs, that will be sent to me if I am included in the Roster, which shall be subject to UNDP's review, acceptance and payment certification procedures;
3. This offer shall remain valid for a total period of \_\_\_\_\_ days *[minimum of 90 days]* after the submission deadline;
4. 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];*

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| 1. If I am selected for this assignment, I shall: *[pls. check the appropriate box]*
* Sign an Individual Contract with UNDP;
* Request my employer *[state name of company/organization/institution]* to sign with UNDP a Reimbursable Loan Agreement (RLA), for and on my behalf. The contact person and details of my employer for this purpose are as follows:

 1. I hereby confirm that: *[check all that applies]*
* At the time of this submission, I have no active Individual Contract or any form of engagement with any Business Unit of UNDP;
* I am currently engaged with UNDP and/or other entities for the following work:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assignment** | **Contract Type** | **UNDP Business Unit / Name of Institution/Company** | **Contract Duration** | **Contract Amount** |
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* I am also anticipating conclusion of the following work from UNDP and/or other entities for which I have submitted a proposal:

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| **Assignment** | **Contract Type**  | **Name of Institution/ Company** | **Contract Duration** | **Contract Amount** |
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1. I fully understand and recognize that UNDP is not bound to accept this proposal, and I also understand and accept that I shall bear all costs associated with its preparation and submission and that UNDP will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the selection process;
2. ***If you are a former staff member of the United Nations recently separated, pls. add this section to your letter:*** I hereby confirm that I have complied with the minimum break in service required before I can be eligible for an Individual Contract;
3. I also fully understand that, if I am engaged as an Individual Contractor, I have no expectations nor entitlements whatsoever to be re-instated or re-employed as a staff member.

Full Name and Signature: Date Signed: **Annexes:** *[pls. check all that applies]** CV or Duly signed P11 Form
* Breakdown of Costs (lump-sum fee)

**Important Note: Please submit this form duly signed.**1. **Breakdown of Cost by Components**

|  |  |  |
| --- | --- | --- |
| **Cost Components** | **Lump-sum fee for Product 1** **(US Dollars)** | **Lump-sum fee for Products 1 and 2** **(US Dollars)** |
| Professional fee |  |  |
| Data collection (if applicable) |  |  |
| Other costs (specify) |  |  |
| Institutional overhead (if applicable) |  |  |
| **Total Lump-sum fee** |  |  |

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