**Annex 2**

**FORM FOR SUBMITTING SERVICE PROVIDER’S PROPOSAL[[1]](#footnote-1)**

***(This Form must be submitted only using the Service Provider’s Official Letterhead/Stationery[[2]](#footnote-2))***

 [insert: *Location]*.

[insert: *Date]*

To: **UNDP RBAS Regional Hub Amman**

Dear Sir/Madam:

We, the undersigned, hereby offer to render the following services to UNDP in conformity with the requirements defined in the RFP ref. **RBAS-RFP-042/2019 dated 11/27/2019** , and all of its attachments, as well as the provisions of the UNDP General Contract Terms and Conditions :

1. **Qualifications of the Service Provider**

*The Service Provider must describe and explain how and why they are the best entity that can deliver the requirements of UNDP by indicating the following:*

1. *Profile – describing the nature of business, field of expertise, licenses, certifications, accreditations;*
2. *Business Licenses – Registration Papers, Tax Payment Certification, etc.*
3. *Latest Audited Financial Statement – income statement and balance sheet to indicate Its financial stability, liquidity, credit standing, and market reputation, etc.;*
4. *Track Record – list of clients for similar services as those required by UNDP, indicating description of contract scope, contract duration, contract value, contact references;*
5. *Certificates and Accreditation – including Quality Certificates, Patent Registrations, Environmental Sustainability Certificates, etc.*
6. *Written Self-Declaration that the company is not in the UN Security Council 1267/1989 List, UN Procurement Division List or Other UN Ineligibility List.*
7. **Proposed Methodology for the Completion of Services**

|  |
| --- |
| *The Service Provider must describe how it will address/deliver the demands of the RFP; providing a detailed description of the essential performance characteristics, reporting conditions and quality assurance mechanisms that will be put in place, while demonstrating that the proposed methodology will be appropriate to the local conditions and context of the work.* |

1. **Qualifications of Key Personnel**

*If required by the RFP, the Service Provider must provide:*

1. *Names and qualifications of the key personnel that will perform the services indicating who is Team Leader, who are supporting, etc.;*
2. *CVs demonstrating qualifications must be submitted if required by the RFP; and*
3. *Written confirmation from each personnel that they are available for the entire duration of the contract.*
4. **Cost Breakdown per Deliverable\***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SN** | **Deliverables*****[list them as referred to in the RFP]*** | **No. of Persons** | **Time****(Persons day)** | **Professional Fees** | **Other Costs** | **Total** **( All inclusive)** |
| **1** | **1:** Preliminary outline, proposed methodology and workplan to ensure a multidimensional approach and a human development lens |  |  |   |  |  |
| **2** | **2**: Conceptual framework and bibliography list, including data sources that will be used in each of the four research papers |  |  |  |  |  |
| **3** | **3:** First draft of each of the four research papers |  |  |  |  |  |
| **4** | **4:** Finalized version of the four research papers; review of the Arabic translation |  |  |  |  |  |
|  | **Total**  |  |  |  |  |  |

1. **Cost Breakdown by Cost Component [*This is only an Example]*:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description of Activity** | **Remuneration per Unit of Time** | **Total Period of Engagement** | **No. of Personnel** | **Total Rate**  |
| **I. Personnel Services**  |  |  |  |  |
|  1. Services from Home Office |  |  |  |  |
|  a. Expertise 1 |  |  |  |  |
|  b. Expertise 2 |  |  |  |  |
|  2. Services from Field Offices |  |  |  |  |
|  a . Expertise 1 |  |  |  |  |
|  b. Expertise 2  |  |  |  |  |
|  3. Services from Overseas |  |  |  |  |
|  a. Expertise 1 |  |  |  |  |
|  b. Expertise 2 |  |  |  |  |
| **II. Out of Pocket Expenses** |  |  |  |  |
|  1. Travel Costs |  |  |  |  |
|  2. Daily Allowance |  |  |  |  |
|  3. Communications |  |  |  |  |
|  4. Reproduction |  |  |  |  |
|  5. Equipment Lease |  |  |  |  |
|  6. Others |  |  |  |  |
| **III. Other Related Costs** |  |  |  |  |

*[Name and Signature of the Service Provider’s Authorized Person]*

*[Designation]*

*[Date]*

1. *This serves as a guide to the Service Provider in preparing the Proposal.*  [↑](#footnote-ref-1)
2. *Official Letterhead/Stationery must indicate contact details – addresses, email, phone and fax numbers – for verification purposes*  [↑](#footnote-ref-2)