**Annex 2**

**FORM FOR SUBMITTING SUPPLIER’S QUOTATION[[1]](#footnote-1)**

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

We, the undersigned, hereby accept in full the UNDP General Terms and Conditions, and hereby offer to supply the items listed below in **139/20**:

**TABLE 1 : Offer to Supply Goods Compliant with Technical Specifications and Requirements**

**LOT 1 Supply of medical equipment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item No.** | **Description/Specification of Goods** | **Quantity** | **Latest Delivery Date** | **Unit Price currency** | **Total Price per Item, currency** |
|  | **Blood glucose meter** | **2** | **30 days** |  |  |
|  | Glucose test strip, compatible with the proposed Blood glucose meter | **1000** | **30 days** |  |  |
|  | **Cholesterol meter** | **2** | **30 days** |  |  |
|  | Cholesterol test strip compatible with the proposed Cholesterol meter | **338** | **30 days** |  |  |
|  | **Pulsе oximeter** | **2** | **30 days** |  |  |
|  | **Blood pressure meter** | **2** | **30 days** |  |  |
|  | **Color doppler ultrasound machine** | **1** | **30 days** |  |  |
|  | **Electrocardiograph** | **2** | **30 days** |  |  |
|  | **Bag for blood test transportation**  |  |  |  |  |
|  | **Total:** |  |  |  |  |
|  | **Total Prices of Goods[[3]](#footnote-3)** |  |
|  |  Add : Cost of Transportation Cost of Transportation to Yerevan |  |
|  |  Add : Cost of Insurance |  |
|  |  Add : Other Charges (pls. specify) |  |
|  | **Total Final and All-Inclusive Price Quotation** |  |

**LOT 2 *Furnishing/installation of the equipment in the Karcomauto #1 UAZ 374195 (Van) for mobile health care testing with following equipment***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item No.** | **Description/Specification of Goods** | **Quantity** | **Latest Delivery Date** | **Unit Price currency** | **Total Price per Item, currency** |
|  | **Cupboard** | **2** | **45 days** |  |  |
|  | **Waste box** | **2** | **45 days** |  |  |
|  | **Armchair for blood tests** | **2** | **45 days** |  |  |
|  | **Portable stainless steel gynecology examination couch** | **2** | **45 days** |  |  |
|  | **Cable 50 meters** | **2** | **45 days** |  |  |
|  | **Total:** |  |  |  |  |
|  | **Total Prices of Goods[[4]](#footnote-4)** |  |
|  |  Add : Cost of Transportation Cost of Transportation to Yerevan |  |
|  |  Add : Cost of Insurance |  |
|  |  Add : Other Charges (pls. specify) |  |
|  | **Total Final and All-Inclusive Price Quotation** |  |

**LOT 3 Supply of testing equipment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item No.** | **Description/Specification of Goods** | **Quantity** | **Latest Delivery Date** | **Unit Price currency** | **Total Price per Item, currency** |
|  | **Urinalysis test strip** | 125 | **30 days** |  |  |
|  | **PAP tests-gynecological brush** | 46 | **30 days** |  |  |
|  | **Fixator** | 1 | **30 days** |  |  |
|  | **Vaginal speculum** | 46 | **30 days** |  |  |
|  | **Glass cover** | 46 | **30 days** |  |  |
|  | **ECG tape** | 10 | **30 days** |  |  |
|  | **Ultrasound gel 10 litre** | 1 | **30 days** |  |  |
|  | **Covid 19 test** | 1000 | **30 days** |  |  |
|  | **Medical tourniquet** | 10 | **30 days** |  |  |
|  | **Gel and clot activator vacuum tubes+ syringe 3ml** | 250 | **30 days** |  |  |
|  | **Gel and clot activator vacuum tubes+ syringe 5ml** | 250 | **30 days** |  |  |
|  | **Total:** |  |  |  |  |
|  | **Total Prices of Goods[[5]](#footnote-5)** |  |
|  |  Add : Cost of Transportation Cost of Transportation to Yerevan |  |
|  |  Add : Cost of Insurance |  |
|  |  Add : Other Charges (pls. specify) |  |
|  | **Total Final and All-Inclusive Price Quotation** |  |

**Additional Requirements**

|  |  |  |
| --- | --- | --- |
| **No** | **Description** | **Availability (Yes/No)** |
| 1 | Technical responsiveness/Full compliance to requirements  |  |
| 2 | Manufacturer/suppliers must have at least 3 years of experience in manufacturing/supply of required goods or similar products. |  |
| 3 | Warranty and post-warranty local service on required equipment as per Annex 1.  |  |
| 4 | Full acceptance of the PO/Contract General Terms and Conditions |  |
| 5 | Detailed technical specifications |  |
| 6 | Written Self-Declaration of not being included in the UN Security Council 1267/1989 list, UN Procurement Division List or other UN Ineligibility List |  |
| 7 | Delivery in 30 days for LOT 1 and LOT 3 and 45 days for LOT 2 |  |

All other information that we have not provided automatically implies our full compliance with the requirements, terms and conditions of the RFQ.

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

*[Designation]*

*[Date]*

1. *This serves as a guide to the Supplier in preparing the quotation and price schedule.*  [↑](#footnote-ref-1)
2. *Official Letterhead/Stationery must indicate contact details – addresses, email, phone and fax numbers – for verification purposes*  [↑](#footnote-ref-2)
3. *Pricing of goods should be consistent with the INCO Terms indicated in the RFQ* [↑](#footnote-ref-3)
4. *Pricing of goods should be consistent with the INCO Terms indicated in the RFQ* [↑](#footnote-ref-4)
5. *Pricing of goods should be consistent with the INCO Terms indicated in the RFQ* [↑](#footnote-ref-5)