**Annex 3**

**FORM FOR SUBMITTING SUPPLIER’S QUOTATION**

***(This Form must be submitted only using the Supplier’s Official Letterhead/Stationery)***

We, the undersigned, hereby accept in full the UNDP General Terms and Conditions, and hereby offer to supply the items listed below in conformity with the specification and requirements of UNDP as per RFQ Reference No. 2020/PROC/UNDP-MMR/PN/129:

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

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item No.** | **Description/Specification of Goods** | **Quantity** | **Country of Origin** | **Latest Delivery Date** | **Unit Price**  **(MMK/USD)** | **Total Price per Item (MMK/USD)** |
| 1 | Patient Monitor | 12 unit |  |  |  |  |
| **Total Prices of Goods** | | | | | |  |
| Add : Cost of Transportation (if require) | | | | | |  |
| Add : Cost of Insurance (if require) | | | | | |  |
| Add : Other Charges (if require) | | | | | |  |
| **Total Final and All-Inclusive Price Quotation** | | | | | |  |

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

*Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*&email, phone*

*Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**TABLE 2 : Offer to Comply with Other Conditions and Related Requirements**

|  |  |  |  |
| --- | --- | --- | --- |
| **Other Information pertaining to our Quotation are as follows:** | **Your Responses** | | |
| ***Yes, we will comply*** | ***No, we cannot comply*** | ***If you cannot comply, pls. indicate counter proposal*** |
| Delivery Lead Time (Within 40 days after issuance of Purchase Order) |  |  |  |
| Delivery Term (DAP) to Sittwe |  |  |  |
| Estimated weight/volume/dimension of the Consignment: |  |  |  |
| Country/ies of Origin: |  |  |  |
| Warranty and After-Sales Requirements |  |  |  |
| 1. Immediately replace with supplier own cost for the new one if newly procured item is mal-functioning on test run |  |  |  |
| 1. Minimum Two (1) years warranty on both parts and service |  |  |  |
| 1. Service Unit to be Provided when the Purchased Unit is Under Repair |  |  |  |
| Validity of Quotation (120 days) |  |  |  |
| All Provisions of the UNDP General Terms and Conditions |  |  |  |
| UNDP Payment Term |  |  |  |

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]*

*Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*&email,phone*

*Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*