**ANNEX III**

**OFFEROR’S LETTER TO UNDP**

**CONFIRMING INTEREST AND AVAILABILITY**

**FOR THE INDIVIDUAL CONTRACTOR (IC) ASSIGNMENT**

Date

Head of Procurement Unit

United Nations Development Programme

Indonesia Country Office, Menara Thamrin 8th floor

Jl, MH Thamrin Kav 3,

Jakarta

Dear Sir/Madam:

I hereby declare that:

I have read, understood and hereby accept the Terms of Reference describing the duties and responsibilities of **Consultant to Support Strengthen the Disease Surveillance System at the Correctional Health Facility**

1. I have also read, understood and hereby accept UNDP’s General Conditions of Contract for the Services of the Individual Contractors;
2. I hereby propose my services and I confirm my interest in performing the assignment through the submission of my CV which I have duly signed and attached hereto as Annex 1;
3. 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 [delete this item if the TOR does not require submission of this document];
4. I hereby propose to complete the services based on the following payment rate: *[please check the box corresponding to the preferred option]:*

* An all-inclusive daily fee of [*state amount in words and in numbers indicating currency]*
* A total lump sum of [*state amount in words and in numbers, indicating exact currency]*, payable in the manner described in the Terms of Reference.

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 specified in the TOR, 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];*
5. If I am selected for this assignment, I shall *[please 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** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

* I am also anticipating conclusion of the following work from UNDP and/or other entities for which I have submitted a proposal:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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, please 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.
4. Are any of your relatives employed by UNDP, any other UN organization or any other public international organization?

C:\Users\jennifer.pareja\Desktop\bpi.PNGYES  NO If the answer is "yes", give the following information:

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Name of International Organization** |
|  |  |  |
|  |  |  |
|  |  |  |

1. Do you have any objections to our making enquiries of your present employer?

YES  NO 

1. Are you now, or have you ever been a permanent civil servant in your government’s employ?

YES  NO  If answer is "yes", WHEN?

1. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications.

|  |  |  |
| --- | --- | --- |
| **Full Name** | **Full Address and Contact Details** | **Business or Occupation** |
|  |  |  |
|  |  |  |
|  |  |  |
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1. Have you been arrested, indicted, or summoned into court as a defendant in a criminal proceeding, or convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations)?

YES  NO  If "yes", give full particulars of each case in an attached statement.

I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on a Personal History form or other document requested by the Organization may result in the termination of the service contract or special services agreement without notice.

DATE: SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NB. You will be requested to supply documentary evidence which support the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so and, in any event, do not submit the original texts of references or testimonials unless they have been obtained for the sole use of UNDP.

**Annexes:**

* CV shall include Education/Qualification, Processional Certification, Employment Records /Experience
* Breakdown of Costs Supporting the Final All-Inclusive Price as per Template
* Brief Description of Approach to Work (if required by the TOR)

**ANNEX 3**

**BREAKDOWN OF COSTS[[1]](#footnote-1)**

**SUPPORTING THE ALL-INCLUSIVE FINANCIAL PROPOSAL**

1. **Breakdown of Cost by Components:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Cost Components** | **Unit Cost**  **(IDR)** | **Quantity** | **Total Rate for the Contract Duration**  **(IDR)** |
| 1. **Personnel Costs** |  |  |  |
| Professional Fees |  | 107  working day |  |
|  |  |  |  |

1. **Breakdown of Cost by Deliverables\***

|  |  |  |
| --- | --- | --- |
| **Deliverables** | **Percentage of Total Price (Weight for payment)** | **Amount** |
| 1st Deliverable:  Submission of assessment report (including its protocol) on the implementation of the existing recording and reporting health system in correctional facility (in English and Bahasa Indonesia) |  |  |
| 2nd Deliverable:  Submission of the national guideline for the implementation of health surveillance (communicable diseases; non communicable disease; drug addiction; COVID-19) in correctional facility (prisons and prison’s hospital) (in English and Bahasa Indonesia) |  |  |
| 3rd Deliverable:  Submission of the final training module on the application of health surveillance in prison settings and report of the training for prison health personnel (in English and Bahasa Indonesia) |  |  |
| 4th Deliverable:  Submission of quarterly progress report of the pilot implementation of health surveillance in correctional facility (starting the first quarter of its implementation) and its feasibility evaluation report. (in English and Bahasa Indonesia) |  |  |
| 5th Deliverable:  Submission of the final consultancy report and the revision of the prison health surveillance guideline based on the feasibility evaluation report. (in English and Bahasa Indonesia) |  |  |
|  |  |  |
| Total | 100% | IDR |

*\*Basis for payment tranches*

1. The costs should only cover the requirements identified in the Terms of Reference (TOR) [↑](#footnote-ref-1)