

## **BIDDER'S QUESTIONNAIRE - ACTED JORDAN**

Date:

Tender N°: T/15DCI/O96/RCH/HOD/25-10-2018/001

PART I: INFORMATION				
A. Company Details a	and General Information			
Name of Company		Trading As		
Address (headquarters)		Telephone		
Zip Code (headquarters)		Fax		
City (headquarters)		E-mail address 1		
PO Box		E-mail address 2		
Country (headquarters)		Website address		
Parent Company or name of owner		Subsidiaries/ Associates/ Overseas Representative		
Sales Person's Name		Sales Person's Position		
Sales Person's phone		Sales Persons' E-mail		
Governance of the compa	any: Chairman, Vice-Chairman, T	reasurer or Secretary of the E	Board of Directors or Board of Trustees	
Name (as in passport or other government-issued photo ID)		Date of birth (mm/dd/yyyy)		
Government-issued photo Identification Document (ID) number		Type of ID		
ID country of issuance		Rank or title in organization		
Other names used (nicknames or pseudonyms not listed as "Name")		Gender (e.g. male, female)		
Current employer and job title:		Occupation		
Address of residence		Citizenship(s)		
Province/Region		E-mail address		
Is the individual a U.S. citizen or legal permanent resident?	☐ Yes ☐ No	Professional Licenses – State Issued Certifications		
_	pany: CEO, Executive Director, D		/ice-President	
Name (as in passport or other government- issued photo ID)		Date of birth (mm/dd/yyyy)		
Government-issued photo Identification Document (ID) number		type of ID		
ID country of issuance		Rank or title in organization		
Other names used (nicknames or pseudonyms not listed as "Name")		Gender (e.g. male, female)		
Current employer and job title:		Occupation		





T/15DCI/O96/RCH/HOD/25-10-2018/001

Address of residence			Citizenship(s)		
Province/Region			E-mail addresses		
Is the individual a U.S.			Professional Licenses –		
citizen or legal	☐ Yes	☐ No	State Issued		
permanent resident?			Certifications		
Management of the comp	any: Chief Finance	e Officer or Ch			
Name (as in passport			Date of birth		
or other government- issued photo ID)			(mm/dd/yyyy)		
Government-issued			type of ID		
photo Identification			type of ib		
Document (ID) number					
ID country of issuance			Rank or title in		
·			organization		
Other names used			Gender (e.g. male,		
(nicknames or			female)		
pseudonyms not listed			,		
as "Name")					
Current employer and			Occupation		
job title:					
Address of residence			Citizenship(s)		
Province/Region			E-mail addresses		
Is the individual a U.S.			Professional Licenses –		
citizen or legal	☐ Yes	□ No	State Issued		
permanent resident?			Certifications		
Company's staff & insurar	nce				
No. Full Time			Employee average work w	ago por hour:	
Employees:			Employee average work w	age per nour.	
% of Men to Women:			Any employee(s) with relat	ives working with	Yes No
70 OF WIGHT to WORKER.			ACTED?		
No. of Children:			Legal minimum wage paid	?	☐ Yes ☐ No
In what capacity?			Paid vacations are offered	?	☐ Yes ☐ No
What are their ages?			Are flexible working bours	offered?	
What are their ages?			Are flexible working hours	onerea?	☐ Yes ☐ No
Name of insurance					
company:			Staff covered by health ins	urance?	
			Ctan covered by modition	aranoo.	Yes No
Deparintion of the Course	nu.				
Description of the Compa	ny .		_	_	
Type of Business	Manufac	tui	Authorised Agent	■ Trader	
(multiple choices	☐ Consulti	na Campany	Other (Please Specify)		
possible):			<del>/////</del>		
	1				
Sector of Business			75		
Sector of Business (multiple choices	☐ Goods/Su	ppl [	_ Equipment	Wats	
	Goods/Su	<b>ppl</b> [	Equipment Other (Please Specify)	Works	
(multiple choices possible):		<b>ppl</b> [	Other (Please Specify)	Wats	
(multiple choices possible):  Year Established:		<b>[</b>	Other (Please Specify)  Country of registration:	☐ Warts	
(multiple choices possible):		<b>ppi</b> [	Other (Please Specify)	□ Works	
(multiple choices possible):  Year Established:	Services		Other (Please Specify)  Country of registration:  Valid until:		
(multiple choices possible):  Year Established:	Services		Other (Please Specify)  Country of registration:	☐ Works	an
(multiple choices possible):  Year Established:	Services	jish [Fi	Country of registration:  Valid until:  Sparish	Russi	an .
(multiple choices possible):  Year Established:  Licence number:	Services	jish [Fi	Other (Please Specify)  Country of registration:  Valid until:	Russi	an
(multiple choices possible):  Year Established:  Licence number:	Services	jish [Fi	Country of registration:  Valid until:  Sparish	Russi	a
(multiple choices possible):  Year Established:  Licence number:	Services	gish	Country of registration:  Valid until:  Sparish	Russi	





T/15DCI/O96/RCH/HOD/25-10-2018/001

Technical de available in:		Arabic Chinese Other (Please Specify)						
B. Financi	al Informati	ion						
VAT Numbe	er:			Tax Number:				
Bank Name	•			Bank Account Number:				
Bank Addre	SS:			Account Name:				
Swift/BIC nu	ımber:			Standard Payment Terms:		Yes		
	npany been a	udited in			Attached			
the last 3 ye	ears?	00 00mno	ny's most recent Anni	ual or Audited Financial				
Report	л а сору ог п	ie compa	ny s most recent Anni	dai of Addited Financial				
Annual Valu	e of Total Sa		last 3 Years:					
A 1)/ 1	Year:	USD:	Year:	USD:	Year:	USD:		
last 3 years	e of Export S	ales for tr	16					
lact o youro	Year:	USD:	Year:	USD:	Year:	USD:	1	
C. Experie	ence							
		ss with A	CTED and/or other In	ternational Aid Agencies or Ur	nited Natio	ns Agencies:		
		Cont		<u> </u>	Valu			
	Organisat ion	act perso n	Phone/E-mail	Goods/Works/Services	e (US D)	Year	Destination	
1								
2								
3								
4								
5								
of expertise								
What is you coverage ar	r company's t ea?	ousiness	☐ National	Restricted to (	specify k	xalion		
company ex	ountries has your oported and/or	r manage	d					
	he last 3 year other informa							
demonstrate	es your compa	any's						
qualification awards)	s and experie	nce (eg.						
List any nati	ional or intern							
	ssional Orgar company is a		of					
	cal Capabili							
	ality Assuranc						Attached	
Type of Certification/Qualification Documents						Attach <u>ed</u>		
	l Offices/Repi	resentatio	n			I		
			ods and/or Services yo	our company sells:				
1)			6)					
2)			7)					
3)			8)					
4)			9)					





	ur company (trucks & heavy machines, heavy & valuable equip	oment, premises & wa	arehouses, production
sites etc.) 1)	6)		
2)	7)		
3)	8)		
4)	9)		
5) E. Miscellaneous	10)		
Does your company have	an Environmental Policy? (Yes/No)	∐ Yes ☐	No
	an Ethical Trading Policy? (Yes/No)	☐ Yes ☐	No
	an Anti-terrorist Policy? (Yes/No)	☐ Yes ☐	No
Is your company compliar equivalent)? (Yes/No)	nt with the EU General Data Protection Regulation (or	☐ Yes ☐	No
If you answered yes to the	e above two questions, please attach copies of your policy:		■ Attached
administered by the courts activities, is the subject of from a similar procedure p	een bankrupt, or is in the process of being wound up, having it is, has entered into an arrangement with creditors, has suspend proceedings concerning these matters, or is in any analogous provided for in national law?	ded business	☐ Yes ☐ Nt
If you answered yes, please provide details:			
Has your company ever b which as force of res judic	een convicted of an offence concerning its professional conducata?	ct by a judgment	☐ Yes ☐ Nt
If you answered yes, please provide details:			
Has your company ever b	een guilty of grave professional misconduct proven by other m	neans?	☐ Yes ☐ Nt
If you answered yes, please provide details:			
the payment of taxes in ac	ot fulfilled its obligations relating to the payment of social secu ecordance with the law of the country in which it is established, untry where the contract is to be performed?		☐ Yes ☐ Nx
If you answered yes, please provide details:			
	een the subject of a judgement which has the force of res judic a criminal organisation or any other illegal activity?	cata for fraud,	☐ Yes ☐ Nt
If you answered yes, please provide details:			
	een declared to be in serious breach of contract for failure to c llowing another procurement procedure or grant award proced		☐ Yes
If you answered yes, please provide details:			
contractual obligations, fo donor country?	een declared to be in serious breach of contract for failure to c llowing another procurement procedure or grant award proced		☐ Yes ☐ Nt
If you answered yes, please provide details:			_
	een in any dispute with any Government Agency, the United Nations (including ACTED)?	lations, or	☐ Yes ☐ Nt
If you answered yes, please provide details:			





T/15DCI/O96/RCH/HOD/25-10-2018/001

Do you agree with terms of payment of 30 days?	☐ Yes ☐ No	Do you accept visit of A auditors to your office?		☐ Yes ☐ No
PART II: CERTIFI	CATION			
to ACTED as soon as posubsidiaries, which enga	nt that the information provided in issible in writing. I also understange in any practices that are in bre erest, Anti-fraud, Anti-terrorism Pr	d that ACTED does not doeach of ACTED's Child Pro	business with companies otection, Sexual Exploitation	s, or any affiliates or on and Abuse
Title/Position		Place:		
E-mail address (for contact for verification purposes):		Signature:		
Phone number (for contact for verification purposes):		Company Stamp:		
Check list of support	ting documents		For ACTE	ED use only
1) Trading lice	ense	Attached	Checked	
2) VAT registration/tax clearance certificate		Attached	Checked	
Company profile		Attached	Checked	
Proof of trading/dealership/agent		Attached	Checked	
5) Evidence o	f similar contracts	Attached	Checked	
6) References	3	Attached	Checked	
7) Particulars	of CEO and key personnel	Attached	- Checked	
8) Articles of Art	Association & Certificate of on	Attached	Checked	
	tatements (latest)	Attached	Chedied	
Other (specify):		Attached	Checked	

