## OFFER FORM ACTED *SRI LANKA*

Tender N° (filled in by ACTED): T/08DMD/25F/AEE/COL/MEAL/19.04.2023

Order ID (filled in by ACTED): OF/08DMD/25F/AEE/COL/MEAL/08.03.2023

Date (filled in by Bidders):

## To be Filled by Bidder (COMPULSORY)

|  |  |
| --- | --- |
| **Company’s Name** (as per registration documents) |  |
| **Company Authorized Representative’s Name**(as per registration documents or duly signed Power of Attorney) |  |
| **Company Registration Number** |  |
| **Registration body** |  |
| **Company’s mailing address**Shop/Office/Building NoStreet nameCityGovernorate/province/districtCountry |  |
| **Commercial representative for the bid** (if different from authorized representative) |  |
| **Phone contact number**LandlineMobile No |  |
| **Email address** |  |

I undersigned (to be filled in by Bidders) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

agree to provide ACTED, non-profit NGO, with items answering the following specifications, according to the general conditions and responsibilities that I engage myself to follow.

**Unit and Total prices must be inclusive of all costs (accommodation, travel, per diem, applicable taxes, etc.).**

**Please attach any technical proposal as per attached terms of reference.**

**Lot 1: External consultant (International qualified) for endline external evaluation (*LKR)***

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| --- | --- | --- |
|  | **To be filled in by ACTED** | **To be filled in by the Bidder** |
| **N°** | **Deliverable** | **Detail the related past performance sample required**  | **Unit[[1]](#footnote-2)** | **Quantity****(1)** | **Proposed methodology**(if applicable and different from the terms of reference) | **Country of Residence**(if travelling to field location is required) | **Unit Price excluding taxes*****LKR***  | **Unit Price including all costs & taxes*****LKR***  | **Total Price excluding taxes*****LKR***  | **Total Price including all costs & taxes*****LKR***  |
| 1 | Inception report | Refer to the attached ToR | Consultancy | 01 |  |  |  |  |  |  |
| 2 | Draft final evaluation report and the presentation | Refer to the attached ToR | Consultancy | 01 |  |  |  |  |  |  |
| 3 | Final version of the final evaluation report | Refer to the attached ToR | Consultancy | 01 |  |  |  |  |  |  |
| **Total price** ***(LKR)*** |  |  |

**External consultant (International qualified) for endline external evaluation (*USD)***

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| --- | --- | --- |
|  | **To be filled in by ACTED** | **To be filled in by the Bidder** |
| **N°** | **Deliverable** | **Detail the related past performance sample required**  | **Unit1** | **Quantity****(1)** | **Proposed methodology**(if applicable and different from the terms of reference) | **Country of Residence**(if travelling to field location is required) | **Unit Price excluding taxes*****USD*** | **Unit Price including all costs & taxes*****USD*** | **Total Price excluding taxes*****USD*** | **Total Price including all costs & taxes*****USD*** |
| 1 | Inception report | Refer to the attached ToR | Consultancy | 01 |  |  |  |  |  |  |
| 2 | Draft final evaluation report and the presentation | Refer to the attached ToR | Consultancy | 01 |  |  |  |  |  |  |
| 3 | Final version of the final evaluation report | Refer to the attached ToR | Consultancy | 01 |  |  |  |  |  |  |
| **Total price** ***(USD)*** |  |  |

**Delivery conditions:**

|  |  |  |
| --- | --- | --- |
|  | **Delivery conditions requested by ACTED** | **Delivery conditions offered by the Bidder** (if different) |
| **Delivery date**Two months from agreement signing date including travelling, data collection and finalizing the report (May 2023- June 2023). | **Please refer attached tor** |  |
| **Transportation mean** (if travelling to field location is required)Point of departureExpected travel distance (km/miles)Mode (road/air/sea)Vehicle brand, model & year or flight number | **cost for the transport, accommodation, visits should be covered by supplier.**  |  |

**Bidder’s Conditions:**

|  |  |  |
| --- | --- | --- |
|  | **General conditions recommended by ACTED** | **General conditions offered by the Bidder** (if different) |
| **Validity of the offer** | **3 months min; ideally 6 months** |  |
| **Terms of payment** | **If the supplier’s offer is in USD, The payment will be done based on the contract signed date in USD. If the supplier’s requirement is to make the payment in USD , the supplier must have USD bank account attached with these documents.** **PAYMENTS TO BE DONE BASED ON DELIVERABLES SUBMITTED AND ACCEPTED BY ACTED**  |  |

Name of Bidder’s Authorized Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized signature and stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. **Please note that ACTED service contracts are base on an obligation of result, and not based on time consumption. Therefore, ACTED will not consider offers based on man-days as a unit. Offers must be submitted all costs and taxes inclusive for each deliverable.** [↑](#footnote-ref-2)