



UNHCR
The UN Refugee Agency

UNITED NATION HIGH COMMISSIONER
FOR REFUGEES
Email: procurement@un-hcr.info
1201 Genève, Switzerland
0001

**RFQ
(UNHCR 2022/1086)**

APPOINTMENT OF A SERVICE PROVIDER

TO

DELIVER

**Electric ICU bed Model: CV401d, PART
No: 8287211107CJT**

IN

UKRAINE

1 SCOPE OF THE PROJECT

The department seeks to appoint a service provider to supply and deliver **Electric ICU bed Model: CV401d, PART No: 8287211107CJT with Five Functions** urgently to be installed in during this campaign.

The project requires suppliers to purchase and deliver a total of **FOUR THOUSAND (4000) Pieces Electric ICU bed Model: CV401d, PART No: 8287211107CJT.**

SPECIAL CONDITIONS

- a. All ICU Beds must be as per the specification
- b. All ordered items should be delivered on or before the delivery date stated on the order form

2 PURPOSE OF THIS DOCUMENT

The purpose of this document is to outline to potential service providers the DH's requirements in as far as the **Electric ICU bed Model: CV401d, PART No: 8287211107CJT with Five Functions** are concerned and to ensure that potential service providers are able to submit informed proposals on the required Electric ICU beds with Five Functions including supply and delivery.

3. BUDGET

A project budget, (including supply, delivery and off-loading of the Electric ICU bed with five functions), outlining a scheduled costs associated with the proposed project should be included in your quotation. All monetary values quoted (in United States Dollars) must include Value Added Tax (VAT).

The service provider must provide a fixed price for the duration of the contract period.

Project budget should not exceed **\$5,800,000.00 USD** (Five Million Eight hundred thousand US Dollars only) VAT Inclusive.

4. TIME FRAME

The project is to commence on **Monday, 18 July 2022**. So the successful bidder is expected to deliver on or before **Saturday, 31 July 2022** before the **12:00**.

An official order stating the commencement date and Delivery date will be given to the Successful Bidder on **Saturday, 31 July 2022**.

5. SPECIFICATIONS

Below is a outlining the specifications of the electrosurgical generator required for this project.

ITEM	Electric ICU Bed with Five Functions
PART NUMBER	828721107CJT
MODEL	CV401d
QUANTITY	4,000 Pieces

6. REQUIREMENTS FOR SERVICE PROVIDER

- 8.1 A quotation for the service. Costs should include VAT and where possible should be linked with specific tasks to be undertaken.
- 8.2 warranty period should be stipulated on the quotation
- 8.3 A service provider should comply with the specification.
- 8.4 A valid Tax clearance certificate should accompany the quotation.

7. SUBMISSION OF QUOTATION

The closing date for the submission of quotations is **Saturday 31, July 2022** before **12:00am**. Documents required from the provider should be emailed to United Nations High Commissioner for Refugees at: **procurement@un-hcr.info**

8. DELIVERY ADDRESS:

All the **ELECTRIC ICU Beds** are to be delivered to
Klovs'kyi descent, 1,
Kyiv, Ukraine, 01021

Contact Person:

Mr.

(Tel. +41445056441) Office hours

9. PAYMENT TERMS

Full payment is to be made strictly 7-14 working days after receipt of goods.

PRICING SCHEDULE—FIRM PRICES

(PROFESSIONAL SERVICES)

NOTE: ONLY FIRM PRICES WILL BE ACCEPTED. NON-FIRM PRICES (INCLUDING PRICES SUBJECT TO RATES OF EXCHANGE VARIATIONS) WILL NOT BE CONSIDERED

Name of bidder:	Quotation number: UNHCR 2022/1086
Closing time 12:00	Closing Date: 31 July 2022

Comments: Please provide us with a quotation for the items / Services specified hereunder where applicable, or in accordance with the attached specifications

ITEM	DESCRIPTION OF GOODS	QUANTITY
001	ELECTRIC ICU BED WITH FIVE FUNCTIONS Model: CV401d, PART No: 8287211107CJT	4,000

Quotations must be submitted by Email to procurement@un-hcr.info not later than **31 July 2022**. GMT 12:00.

EVALUATION CRITERION (80/20)

Minimum Requirements:

- Copy of valid tax clearance certificate
- Copy of Valid company registration
- Copy of BBEE certificate or Certified sworn Affidavit from Accountant or Auditors
(Failure to submit BBB_EE Certificate or Sworn Affidavit; no points will be allocated, but will be evaluated further)

General Notes:

- Please note that the United Nation High Commissioner for Refugees reserves the right not to accept the lowest quote or not to proceed with this project. All costs that the service provider may incur due to the preparation of the project for the DH shall be the sole responsibility of the service provider.
- **URGENT NOTICE: Suppliers warned against counterfeit.**

The Department encourages service providers to ensure that they confirm the Vendor number from the Central Suppliers Database

Enquiries in this regard should be directed to Call: +41 44505 6441

Email: procurement@un-hcr.info



**RE: INVITATION TO QUOTE THE SUPPLY AND DELIVER ELECTRIC ICU BED
WITH FIVE FUNCTIONS.**

Comments: Please provide us with a quotation for the items / Services specified here under where applicable, or in accordance with the attached specifications

ITEM	DESCRIPTION OF GOODS	QUANTITY	PRICE	BID PRICE IN USD \$ CURRENCY
001	Electric ICU Bed with Five Functions Model: CV401d PART No: 8287211107CJT	4000		USD \$
TOTAL				USD \$
VAT				USD \$
TOTAL Including VAT				USD \$

Please Note:

- This request for Quotation must be completed and accompanied by an official Quotation
- Quotations must be Emailed to: **procurement@un-hcr.info** not later than **10:30, Saturday, 31 July 2022**
- Quotations should be valid for at least 7 days.
- Please indicate your delivery period:**
- Is delivery period firm? **Yes / No**
- Is the price (s) firm for the duration of the contract? **Yes / No**
- Is the offer strictly to specification? **Yes / No**
- If not to specification, state deviation (s)
.....
- All prices must be VAT inclusive, if NO indication is given, prices will be evaluated as VAT inclusive

I / we agree that the offer herein shall remain binding upon me/us and open for acceptance by the Department of Health during the validity period indicated and calculated from the closing time stated above

NAME:POSITION:

COMPANY NAME:

REGISTRATION NUMBER:VENDOR NUMBER:

.....
SIGNATURE DATE

