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| SPREP-PROE-tall-colour_sml copy.gif | **SECRETARIAT OF THE PACIFIC REGIONAL ENVIRONMENT PROGRAMME**  **TENDER APPLICATION FORM** |

RFT: PWP-184-CON

File: AP\_6/5/8/4

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| **THIS APPLICATION IS FOR THE FOLLOWING TENDER:** |
| **Procure, install, and commission a healthcare incinerator at the London Hospital in Kiritimati Island, Kiribati.** |

*Please note you are required to complete in full all areas requested in the Form, particularly the Statements to demonstrate you meet the selection criteria – DO NOT refer us to your CV.*

*Failure to do this will mean your application will* ***not*** *be considered.*

*For the Technical and Financial proposals you may attach these separately.*

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| **1.** | **DETAILS** | | | | | |
| NAME OF FIRM *(if applicable)* | | |  | | | |
| NAME OF PRINCIPAL CONTRACTOR | | |  | | | |
| LIST OTHER PROPOSED PERSONNEL *(if applicable)* | | |  | | | |
| NATIONALITY | | |  | | | |
| POSTAL ADDRESS | | |  | | E-MAIL ADDRESS |  |
| TELEPHONE WORK | | |  | | MOBILE NUMBER |  |
| TELEPHONE HOME | | |  | | FAX NUMBER |  |
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| **2.** | **ACADEMIC BACKGROUND** *(PRINCIPAL CONTRACTOR & PROPOSED PERSONNEL)* | | | | | |
| Dates | | Institution/Country | | | Qualification Attained | |
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| **3.** | **WORK EXPERIENCE** | | | | | |
| Dates | | Employer | | Position (briefly list core functions) | | |
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| **4.** | **PROFESSIONAL AFFILIATIONS/AWARDS** | | | | | |
| Dates | | Organisation | | | Member/Award Status | |
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| **5.** | **PROFESSIONAL REFEREES (List at least 3 including the most recent relevant to this job)** | | | | | |
| Name | | | Position | | Organisation & Contact Details | |
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| **6.** | **STATE HOW YOU MEET EACH SELECTION CRITERIA** | | | | | |
| **CRITERIA 1**  Demonstrated experience in manufacturing/supplying high temperature healthcare waste incinerator equipment to effectively treat biologically hazardous waste including design specifications that minimize harmful emissions (e.g. dioxins and furans). 10% | | | | | | |
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| **CRITERIA 2**  Demonstrated experience in the provision, installation, commissioning and maintenance of high temperature healthcare waste incinerators, housing and footings appropriate for tropical climates and natural disaster-prone environments 10% | | | | | | |
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| **CRITERIA 3**  Demonstrated experience in the production and execution of maintenance program for healthcare waste incinerators, ancillary equipment and after sales service to ensure continued effective operation 10% | | | | | | |
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| **CRITERIA 4**  Demonstrated experience (evidence to be provided) in arranging and managing shipping: including insurances, documentation, customs, and other clearance documentation; to ensure delivery to quoted timeframes 10% | | | | | | |
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| **CRITERIA 5**  Demonstrated experience in delivery of operator training and assessment (experience in training people from diverse language and cultural backgrounds and with low literacy skills is desirable). 10% | | | | | | |
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| **CRITERIA 6**  Proposed Project Methodology   * Detailed methodology for how the project is proposed to be delivered (including timeframe and team responsibilities where applicable and details of subcontractors to be utilized where required) * Detailing activities to be conducted over the term of the engagement. * Details on the schedule and timeframe required to provide the deliverables   30% | | | | | | |
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| **CRITERIA 7**  SPREP will assess the tenders based on value for money considering (but not limited to) cost, warrantee, etc. 20% | | | | | | |
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| **7.** | **GENERAL INFORMATION** | | | | | |
| Declaration of close relations to any individual who is currently employed at SPREP. Please list name/s and nature of relationship. | | |  | | | |
| Declaration **Tenderer has no association with**  exclusion criteria, including bankruptcy, insolvency or winding up procedures, breach of obligations relating to the payment of taxes or social security contributions, fraudulent or negligent practice, violation of intellectual property rights, under a judgment by the court, grave professional misconduct including misrepresentation, corruption, participation in a criminal organisation, money laundering or terrorist financing, child labour and other trafficking in human beings, deficiency in capability in complying main obligations, creating a shell company and being a shell company. | | |  | | | |

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| Declaration Tenderer (and other proposed personnel) have not been charged with any child related offences | |  | |
| Discipline Record (list past employment disciplinary cases or criminal convictions, if any) | |  | |
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| **8.** | **ANY OTHER ADDITIONAL INFORMATION APPLICANT WISHES TO SUBMIT** | | |
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| **9.** | **HOW DID YOU LEARN ABOUT THIS TENDER?** | | |
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| **10.** | **CERTIFICATION & AUTHORISATION:**  **All information submitted herewith is true and correct. SPREP has the authority to seek verification of any information provided.**  **By signing this application form you are indicating your agreement to SPREP’s Standard Terms and Conditions outlined in the Contract for Services (attached). SPREP Standard Contract Terms and Conditions are non-negotiable.** | | |
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| **Signature** | | | **Date** |

**The following documents must be attached to this Tender application form:**

* Curriculum Vitae – Principal Contractor & Proposed Personnel
* Detailed workplan and schedule of activities (Technical Proposal)
* Financial Proposal
* Business License
* Any other relevant information to support this tender application.

**CONFLICT OF INTEREST FORM**

**Request for Tender (RFT) – Procure, install, and commission a healthcare incinerator at the London hospital in Kiritimati Island, Kiribati.**

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I confirm that I, my family members, and the organisation or company that I am involved with are independent from SPREP. To the best of my knowledge, there are no facts or circumstances, past or present, or that could arise in the foreseeable future, which might call into question my independence.

If it becomes apparent during the procurement process that I may be perceived to have a conflict of interest, I will immediately declare that conflict and will cease to participate in the procurement process, unless or until it is determined that I may continue.

OR

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I declare that there is a potential conflict of interest in the submission of my proposal [please provide an explanation with your proposal]

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Name, Signature Date

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_