

In reply please

refer to : RFP/BAN/2022/016 (Re-1)

Your reference:

22 June 2022

Dear Sir/Madam,

**Subject: Request for Proposal (RFP) for development of Climate Informed Hospital
Emergency Preparedness and Response Plan**

WHO Bangladesh hereby invites proposals/bids from your Organization/Institute for carrying out the above-mentioned subject activity.

You are requested to go through the attached "Request for Proposal" document, which includes, with list of Annexes, as follows:

1. Requirements, Quality and Qualification Requirements, Key Deliverables with timetable
2. The proposal
3. Instructions to Bidders
4. Evaluation of Proposals
5. Award Criteria

Annex-1: Detailed Terms of Reference

Annex-2: Confidentiality Undertaking

Annex 3: Vendor Information Form

Annex-4: Contractual Provisions

Annex-5: Detailed Evaluation and Selection Criteria/Guidelines, Scoring Matrix

Annex-6: Financial Proposal Template

Annex 7: Self Declaration Form

Annex 8: Bidder's Statement of Conformity

Please submit your technical and financial proposals in separate sealed envelopes in the Tender Box kept in the reception of WHO Bangladesh office on or before 14:00hrs, 06 July 2022 as detailed in the Instructions to Bidders of the RFP document (part 3).

At 14:00, 29 June 2022, a virtual pre-bid meeting will be held with the interested bidders.

Bidders shall not include the pricing information within the technical proposal and any noncompliance proposal/ bid with this instruction will lead to rejection of the proposal. Use of WHO emblem/logo in bidder's bid/proposal can also lead to rejection of that bid/proposal.

Please note that "THE WORLD HEALTH ORGANIZATION (WHO) DOES NOT ENTERTAIN ANY OVERHEAD/ADMINISTRATIVE COSTS WHATSOEVER OF THE BIDDERS FOR THE IMPLEMENTATION OF PROPOSED TECHNICAL WORK. THEREFORE, NO SUCH OVERHEAD/ADMINISTRATIVE COSTS SHOULD BE INCLUDED IN THE BIDS.

This letter including annexes is not to be construed in any way as an offer to contract with you or your company.

Thank you,

Yours sincerely,


Thinjay Dorji
WHO Administrative Officer

... Encl.: as stated above



**World Health
Organization**

Climate Informed Hospital Emergency Preparedness and Response Plan

Request for Proposals (RFP)

Bid Reference

RFP/BAN/2022/016 (Re-1)

Country/Unit Name

BAN PHE/WCO BAN

Closing Date:

[06 July 2022

Virtual Pre-bid meeting time: 14:00hrs, 29 June 2022]



The World Health Organization (WHO) is seeking offers for **Climate Informed Hospital Emergency Preparedness and Response Plan**.

Your ☒ Company ☒ Institution is invited to submit a proposal for the services in response to this Request for Proposals (RFP).

WHO is a public international organization, consisting of 194 Member States, and a Specialized Agency of the United Nations with the mandate to act as the directing and coordinating authority on international health work. As such, WHO is dependent on the budgetary and extra-budgetary contributions it receives for the implementation of its activities. Bidders are, therefore, requested to propose the best and most cost-effective solution to meet WHO requirements, while ensuring a high level of service.

1. Requirements

WHO requires the successful bidder, to carry out Some major activities of the assignment are listed below but not limited to the following:

i. Technical Work Group (TWG) Formation

The contractual partner will facilitate the formation of Technical Work Group (TWG) and conduct TWG's meeting. IEDCR will constitute the TWG with members from Directorate General Health Services (DGHS), NIPSOM, Department of Disaster Management (DDM), Health Engineering Department and Public works Department and Bangladesh Meteorological Department (BMD). The TWG will provide technical guidance on various issues in carrying out the task.

ii. Document Review and Data Dollection

Several documents need to be reviewed by the contractual partner before making a hospital evaluation and response plan. Some of these are but not limited to "Hospital Emergency Preparedness and Response Plan," 2011 by DGHS; Report on "In-depth Monitoring of the Operational Plan 'Hospital Services Management (2nd Revised)," 2015 by Implementation Monitoring and Evaluation Division, Ministry of Planning; "Everyone's Business: Whole-of-society Action to Manage Health Risks and Reduce Socioeconomic Impacts of Emergencies and Disasters," 2020, operational guidance by WHO; "Hospital Safety Index," 2015 evaluation forms by WHO; "Integrating Disaster Risk Reduction and Climate Change Adaptation in the UN Sustainable Development Cooperation Framework," 2020 by UNDRR; "Rapid Hospital Readiness Checklist: A Module from the Suite of Health Service Capacity Assessments in the Context of the COVID-19 Pandemic," 2020, interim guidance by WHO; "Technical Guidance Notes on Sendai Framework Reporting For Ministries of Health," 2020 by WHO. **For copy of the Hospital Emergency Preparedness and Response Plan 2011, please contact us by e-mail at sebanprocurement@who.int.**

Secondary data need to be collected from different sources including hospitals located at various climatic zones.

iii. Revision of Emergency Preparedness and Response Plan

The Hospital Emergency Preparedness and Response Plan need to be updated to incorporate climate change issues in the plan based on the Contractual Partner's proposed methodology.

iv. Dissemination Workshop

The updated climate-resilient hospital emergency preparedness and response plan need to be presented in a national workshop with key stakeholders. Based on the findings/comments from the workshop the contractual partner will revise the plan. .

See detailed Terms of Reference in Annex 1 for complete information.

The successful bidder shall be a ☒ for profit / ☒ not for profit institution operating in the field of Emergency preparedness . with proven expertise in and Climate Change, hospital management and health

I. Legally entitled to run/operate the Institutes/organizations/companies as per the applicable rules for companies/ NGOs in the country. WHO shall disqualify bidders during initial scrutiny if the required information and supporting documents are not provided with the technical proposal.



II. Capable to operate with all applicable local rates and costs for the expert (technical) and field services. WHO shall reserve the right to disqualify bidder(s) if they (they bidder) are found to have not asked rates/costs as per the applicable local rates and costs for the expert (technical) and field activities in implementing the desired technical services/works. WHO has its own parameter in determining the applicable local rates and costs for expert (technical) and field activities.

III. Have reputation and reliability in the development field of Bangladesh with capability to associate with other research organization/ individual to enhance their qualifications as per Technical Requirements

IV. Capable to implement the desired work/projects in specified location (project sites) utilizing own existing administrative, operational and logistical resources to implement the projects without adding up Overhead costs to the Purchaser (WHO).

THE WORLD HEALTH ORGANIZATION (WHO) DOES NOT ENTERTAIN ANY OVERHEAD/ADMINISTRATIVE COSTS WHATSOEVER OF THE BIDDERS FOR THE IMPLEMENTATION OF PROPOSED TECHNICAL WORK. THEREFORE, NO SUCH OVERHEAD/ADMINISTRATIVE COSTS SHOULD BE INCLUDED IN THE BIDS.

V. Project management structure is capable to ensure quality assurance procedure including project monitoring and evaluation and internal oversight

VI. The contractual partner needs to construct an Expert Team comprised of 1) Team Leader and Emergency Preparedness Specialist; 2) Climate Change Health Expert. Each of the experts needs to have adequate experiences in their relevant field.

1) Team Leader and Emergency Preparedness Specialist: The Team Leader need to have a MPH with MBBS degree and long working experience in disaster preparedness plan especially in health risk assessment & management during emergency

2) Climate Change Health Expert: The Climate Change and Health Expert need to have a MPH degree and long working experience in climate change. Experience in health related program will be an additional assets.

The successful bidder is expected to demonstrate experience and list relevant projects as follows:

Mandatory experience:

- Demonstrated relevant experience of delivering at least 2 relevant projects/work on health and health system emergency preparedness and response plan preparation/ implementation for with UN or other international organizations and/or major institutions during last 10 years.
- Completed projects on emergency and disaster related projects and programmes implemented in past ten years (2011-2021) of BDT 2 million at minimum/contact during last 2 years.

Desirable experience:

Deliverables and project completion timelines: The major deliverables of the assignment are listed below with time-frame:

No	Description	Deadline	Indicator of progress
1	Signing of the Agreement	1 August 2022	
2	Inception report with workplan and methodology and data collection tool	15 August 2022	Indicate 15% of completion of activity
3	Draft copy of Climate informed Hospital Emergency Preparedness and Response Plan-2022	15 November 2022	Indicate 75% of completion of activity
4	Final copy of Climate informed Hospital Emergency Preparedness and Response	15 December 2022	Indicate 100% of completion of activity



Plan-2022 report and Financial report with supporting original bills/invoice (2022)		
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The timeframe for all deliverables listed here are deadline of final acceptance of the respective deliverable by WHO. All data, documents and materials associated to a deliverable must be submitted in both hard and soft (in 'Pen Drive') copies.

The bidder is expected to follow the instructions set forth below in the submission of their proposal to WHO.

2. Proposal

The proposal and all correspondence and documents relating thereto shall be prepared and submitted in the English language.

The proposal shall be concisely presented and structured to include the following information:

- Confidentiality Undertaking (*please complete Annex 2*)
- Presentation of your Company / Institution (*please complete Annex 3*)
- Proposed Approach/Methodology: Bidders should indicate how they would implement the contract with WHO to perform in structured process in conformity of ToR, timelines and requirement of the works if awarded with the contract.
- Work Approach and Understanding: Bidder's proposal will reflect their understanding of service/work in terms of requirements, inputs, output/deliverables, results and key performance indicators as outlined in the RFP. The bidder should indicate the work approaches including ideas, execution plans e.g. end to end to end contract management/output delivery procedures.
- Financial proposal – the bidder shall quote a price in the template provided in annex-6 in a separate sealed envelope. There shall be no reflections of the financial quotes/inputs in the technical proposal and noncompliance with this requirement shall lead to the rejection of the bid

Information which the bidder considers confidential, if any, should be clearly marked as such.

3. Instructions to Bidders

The bidder must follow the instructions set forth in this RFP in the submission of their proposal to WHO.

A prospective bidder requiring clarification on technical, contractual or commercial matters may notify WHO via email at the following address no later than **28 June 2022**; Interested bidders can join the virtual pre-bid meeting with the bidders at 14:00hrs, 29 June 2022. WHO Bangladesh office will send the virtual Pre-bid meeting link to the interested bidders, who (bidders) would send their interest to join the Pre-bid meeting through e-mail at the following address by 13:00hrs, 29 June 2022:

Email for submissions of all queries: sebanprocurement@who.int
(*use Bid reference in subject line*)

A consolidated document of WHO's responses to all questions (including an explanation of the query but without identifying the source of enquiry) will be sent to all prospective bidders who have received the RFP.

From the date of issue of this RFP to the final selection, contact with WHO officials concerning the RFP process shall not be permitted, other than through the submission of queries and/or through a possible presentation or meeting called for by WHO, in accordance with the terms of this RFP.



The bidder shall submit, in writing, the complete proposal to WHO, no later than **6 July 2022 at 14:00 hours Dhaka time** ("the closing date"), deposit by hand delivery or courier in separate sealed envelopes in tender boxes of WHO Bangladesh at following address

House No. SW(l) 1/A, Road-8, Gulshan-1, Dhaka-1212, Bangladesh .
(use Bid reference in subject line)

To be complete, a proposal shall include:

- 2 copies of technical proposal (master and copy) titled as Technical Proposal for "Climate Informed Hospital Emergency Preparedness and Response Plan" in separate sealed envelope as described under part 2
The technical proposal shall be separate from the financial proposal and there shall be no reflections of the financial quotes/inputs in the technical proposal and noncompliance with this requirement shall lead to the rejection of the bid
- A financial proposal titled a financial proposal for Climate Informed Hospital Emergency Preparedness and Response Plan in separate sealed envelope as described under part 2 above;

1. Annexes 2 & 3, duly completed and signed by a person or persons duly authorized to represent the bidder, to submit a proposal and to bind the bidder to the terms of this RFP.

Each proposal shall be marked Ref: RFP/BAN/2022/016 (Re-1) .

WHO may, at its own discretion, extend the closing date for the submission of proposals by notifying all bidders thereof in writing before the above closing date and time.

Any proposal received by WHO after the closing date for submission of proposals may be rejected. Bidders are therefore advised to ensure that they have taken all steps to submit their proposals in advance of the above closing date and time.

The offer outlined in the proposal must be valid for a minimum period of 90 calendar days after the closing date. A proposal valid for a shorter period may be rejected by WHO. In exceptional circumstances, WHO may solicit the bidder's consent to an extension of the period of validity. The request and the responses thereto shall be made in writing. Any bidder granting such an extension will not, however, be permitted to otherwise modify its proposal.

The bidder may withdraw its proposal any time after the proposal's submission and before the above mentioned closing date, provided that written notice of the withdrawal is received by WHO at the email address indicated above, before the closing date for submission of proposals.

No proposal may be modified after its submission, unless WHO has issued an amendment to the RFP allowing such modifications.

No proposal may be withdrawn in the interval between the closing date and the expiration of the period of proposal validity specified by the bidder in the proposal (subject always to the minimum period of validity referred to above).

WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) bidder, modify the RFP by written amendment. Amendments could, *inter alia*, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.



All prospective bidders that have received the RFP will be notified in writing of all amendments to the RFP and will, where applicable, be invited to amend their proposal accordingly.

All bidders must adhere to the UN Supplier Code of Conduct, which is available on the WHO procurement website at <http://www.who.int/about/finances-accountability/procurement/en/>.

4. Evaluation

Before conducting the technical and financial evaluation of the proposals received, WHO will perform a preliminary examination of these proposals to determine whether they are complete, whether any computational errors have been made, whether the documents have been properly signed, and whether the proposals are generally in order. Proposals which are not in order as aforesaid may be rejected.

The evaluation panel will evaluate the technical merits of all the proposals which have passed the preliminary examination of proposals based on the following weighting:

Technical Weighting:	70 % of total evaluation
Financial Weighting:	30 % of total evaluation

The technical evaluation of the proposals will include:

Addressing of WHO's requirements and expectations	As per Annex-5
Quality of the overall proposal	As per Annex-5
Experience of the firm in carrying out related project	As per Annex-5
Qualifications and competence of the personnel proposed for the assignment	As per Annex-5

The scoring scale per criteria was defined as follows:

Criteria evaluated as:	Based on the following supporting evidence:	Corresponds to the score of:
Excellent	Excellent evidence of ability to exceed requirements	100%
Good	Good evidence of ability to exceed requirements	90%
Satisfactory	Satisfactory evidence of ability to support requirements	70%
Poor	Marginally acceptable or weak evidence of ability to support requirements	40%
Very Poor	Lack of evidence to demonstrate ability to comply with requirements	10%
No submission	Information has not been submitted or is unacceptable	0%

The number of points which can be obtained for each evaluation criterion is specified above and indicates the relative significance or weight of the item in the overall evaluation process.

A minimum of [490 (70%)] points is required to pass the technical evaluation.



The final evaluation will combine the weighted scores of both technical and financial proposals to come up with a cumulative total score.

Please note that WHO is not bound to select any bidder and may reject all proposals. Furthermore, since a contract would be awarded in respect of the proposal which is considered most responsive to the needs of the project concerned, due consideration being given to WHO's general principles, including the principle of best value for money, WHO does not bind itself in any way to select the bidder offering the lowest price.

WHO may, at its discretion, ask any bidder for clarification of any part of its proposal. The request for clarification and the response shall be in writing. No change in price or substance of the proposal shall be sought, offered or permitted during this exchange.

NOTE: Individual contact between WHO and bidders is expressly prohibited both before and after the closing date for submission of proposals.

5. Award

WHO reserves the right to:

1. Award the contract to a bidder of its choice, even if its bid is not the lowest;
2. Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their bids are not the lowest;
3. Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO's action;
4. Award the contract on the basis of the Organization's particular objectives to a bidder whose proposal is considered to be the most responsive to the needs of the Organization and the activity concerned;
5. Not award any contract at all.

WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obliged to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relating to the evaluation/selection process or to state the reasons for elimination to any bidder.

NOTE: WHO is acting in good faith by issuing this RFP. However, this document does not oblige WHO to contract for the performance of any work, nor for the supply of any products or services.

At any time during the evaluation/selection process, WHO reserves the right to modify the scope of the work, services and/or goods called for under this RFP. WHO shall notify the change to only those bidders who have not been officially eliminated due to technical reasons at that point in time.

WHO reserves the right at the time of award of contract to extend, reduce or otherwise revise the scope of the work, services and/or goods called for under this RFP without any change in the base price or other terms and conditions offered by the selected bidder.

WHO also reserves the right to enter into negotiations with one or more bidders of its choice, including but not limited to negotiation of the terms of the proposal(s), the price quoted in such proposal(s) and/or the deletion of certain parts of the work, components or items called for under this RFP.

Within 30 days of receipt of the contract between WHO and the successful bidder (the "Contract"), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the



selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth in Annex 3.

Any and all of the contractor's (general and/or special) conditions of contract are hereby explicitly excluded from the Contract, i.e., regardless of whether such conditions are included in the Contractor's offer, or printed or referred to on the Contractor's letterhead, invoices and/or other material, documentation or communications.

We look forward to receiving your response to this RFP.

Yours sincerely,
Thinlay Dorji
Administrative Officer
WHO Bangladesh



Country/Unit Name BAN PHE/WCO BAN**Annexes**

1. Detailed Terms of Reference
2. Confidentiality Undertaking
3. Vendor Information Form
4. Contractual provisions
5. Detailed Evaluation Criteria
6. Financial Proposal Template
7. Self-Declaration Form
8. Statement of Conformity



Annex 1: Detailed Terms of Reference

1. Purpose of the APW

The objective of the assignment is to revise the "Hospital Emergency Preparedness and Response Plan, 2011" to incorporate lessons from recent events and consideration of the impact of climate change. ***For copy of the Hospital Emergency Preparedness and Response Plan 2011, please contact at sebanprocurement@who.int.***

Specific Objectives

The specific objectives are:

- i. To identify and assess the factors responsible for increasing risk and vulnerabilities of the health care facilities during emergencies (e.g., buildings, patients, health workforce, equipment, and basic lifelines and services).
- ii. To identify possible gender disaggregated interventions (emergency preparedness checklist, equipment, and logistics), treatment options and protocols for reducing the disaster risk in the health care facility.
- iii. To consider different climate risks from different geophysical locations in the preparedness plan.

2. Background

A hospital is a facility that is staffed and equipped to diagnose diseases, treat sick and injured people (both medically and surgically), and house them while they recover. Hospitals vary in capacity and size depending on the services provided and the resources available. Every hospital, regardless of its type or size, distributes and manages its manpower, drug supplies, logistical, and financial resources based on an annual general estimate of inpatients and outpatients. However, any hospital can be overburdened at any time due to disease outbreaks, natural or manmade disasters, other incident situations. Single or multiple incidents may occur simultaneously.

Floods, landslides, tornadoes, tidal surges, heat/cold waves, tropical cyclones, riverbank erosion, drought, earthquakes, and other natural catastrophes have struck the country in recent years. Like natural disasters, man-made disasters are not uncommon in the country. Hazardous material spills, groundwater contamination (Arsenic), transport accidents, mining accidents, structure failures, explosions, acts of terrorism, etc. were among. Depending on the type and extent of the disaster, the amount of fatalities and property damage varies.

Hospitals are the initial point of contact for injured and traumatized persons, where they are usually given first assistance, and treatment and counselling, as well as a referral after a disastrous event. However, hospitals are sometimes made worse by a lack of people, medications, logistics/instruments, and financial resources, because of poorly constructed, damaged, or unable to function correctly. Hospitals may be impacted as a result of the high volume of patients who rely on their services during a disaster or emergency.

In 2011, the Directorate General Health Services, with WHO technical assistance, prepared a Hospital Emergency Preparedness and Response Plan to provide technical guidelines and procedures to health workers.^{1,2} to enhance their capacity and preparedness for dealing with mass casualties and trauma victims in emergency situation. It also aims at improving hospital services' institutional capability. Infrastructure, patients, the health workforce, equipment, essential lifelines and services, structural and non-structural aspects, and possible intervention were all taken into account when designing the guideline.

¹ Hospital Emergency Preparedness and Response Plan, 2011. A guidebook for emergency health personnel. Emergency Preparedness and Response Program, Disease Control Unit, Director General of Health Services (DGHS); ISBN 978-984- 33-4022-1

² Implementation Monitoring and Evaluation Division, 2015. Report on in-depth monitoring of the operational plan "Hospital Services Management (2nd Revised)", Ministry of Planning, Government of the people's republic of Bangladesh http://hospitaldghs.gov.bd/wp-content/uploads/2019/12/OP-report_Hospital-Services-Management-2nd-Revised.pdf



Rationale

A decade has passed since the Hospital emergency plan was developed. During this period the country has experienced many hazards with varying types and magnitudes. The following are some of many hazards that have attracted attention of the whole nation with grief. Cyclone SIDR, Amphun Blast at Narayanganj chemical warehouse, fires in Tajrin Garment Factory, Hashem food industry, Rupgonj, Neemtoli fire incidence, FR Tower Banani etc. Each of the above incident gave us new challenges and lessons and point its figure to the fact that our hospital preparedness needs to be revisited and updated.

Due to climate change, extreme weather events are occurring more frequently and intensely. The number of hottest days and days with heavy rainfall are increasing. Flash floods and monsoon floods occur practically every year, with varying degrees of severity. Big cyclones are occurring in the coastal area (Cyclone Mahasen (2013); Aila (2014); Mora (2017); Bulbul (2019); Amphun (2020)) more frequently. Such climate change related catastrophes are likely to become more intense, causing hospital, regardless of size or kind, to become overburdened at any time and in any location.

While many types of disease outbreaks and natural and manmade incidents become more frequent the hospital emergency preparedness and response plan 2011 becomes outdated and inadequate to manage the need of handling new events of complex nature. In addition, multiple disasters happened at the same time in the country when the COVID 19 outbreak is ongoing. Real-time experience revealed that hospital management experienced challenges to manage the emergencies due to lack of logistics, response plan, capacity etc. in providing health care services to the affected people.

Based on the fact as described above the hospital emergency preparedness and response plan 2011 needs to be revised, updated, and climate informed taking into consideration of new climate challenges and occurrence of multiple incidents at a particular time.

3. Planned timelines (subject to confirmation)

Start date: 1 August 2022 End date: 15 December 2022

Total duration: 4.5 Months

4. Requirements - Work to be performed

Some major activities of the assignment are listed below but not limited to the following:

- I. The contractual Partner will facilitate the formation of Technical Work Group (TWG) and conduction of TWG's meeting. The IEDCR will constitute the TWG with members from DGHS, NIPSOM, Department of Disaster Management (DDM), Health Engineering Department and Public works Department and Bangladesh Meteorological Department (BMD). The TWG will provide technical guidance on various issues in carrying out the task.
- II. Document Review and data collection
Several documents need to be reviewed by the contractual partner before making a hospital evaluation and response plan. Some of these are but not limited to "Hospital Emergency Preparedness and Response Plan," 2011 by DGHS; Report on "In-depth Monitoring of the Operational Plan 'Hospital Services Management (2nd Revised)," 2015 by Implementation Monitoring and Evaluation Division, Ministry of Planning; "Everyone's Business: Whole-of-society Action to Manage Health Risks and Reduce Socioeconomic Impacts of Emergencies and Disasters," 2020, operational guidance by WHO; "Hospital Safety Index," 2015 evaluation forms by WHO; "Integrating Disaster Risk Reduction and Climate Change Adaptation in the UN Sustainable Development Cooperation Framework," 2020 by UNDRR; "Rapid Hospital Readiness Checklist: A Module from the Suite of Health Service Capacity Assessments in the Context of the COVID-19 Pandemic," 2020, interim guidance by WHO; "Technical Guidance Notes on Sendai Framework Reporting For Ministries of Health," 2020 by WHO. Secondary data need to be collected from different sources including hospitals located at various climatic zones.



III. Revision of Emergency Preparedness and Response Plan

A Climate informed Hospital Emergency Preparedness and Response Plan need to be updated based on the CP's proposed methodology.

IV. Dissemination Workshop

The updated climate informed hospital emergency preparedness and response plan need to be presented in a national workshop with key stakeholders. Based on the findings/comments from the workshop the contractual partner should revise the plan.

5. Requirements - Planning

Deliverables: The major deliverables of the assignment are listed below with time-frame:

No	Description	Deadline	Indicator of progress
1	Signing of the Agreement	1 August 2022	
2	Inception report with workplan and methodology and data collection tool	15 August 2022	Indicate 15% of completion of activity
3	Draft copy of Climate informed Hospital Emergency Preparedness and Response Plan-2022	15 November 2022	Indicate 75% of completion of activity
4	Final copy of Climate informed Hospital Emergency Preparedness and Response Plan-2022 report and Financial report with supporting original bills/invoice (2022)	15 December 2022	Indicate 100% of completion of activity

The timeframe for all deliverables listed here are deadline of final acceptance of the respective deliverable by WHO. All data, documents and materials associated to a deliverable must be submitted in both hard and soft (in 'Pen Drive') copies.

6. Inputs

The concerned Technical Unit Health and Environment of WHO will provide timely technical advise and act as liaison between government and contractor to carryout the required tasks.

7. Activity Coordination & Reporting

Technical Officer:	Mr Shamsul Gafur Mahmud, NPO-WSH, Health & Environment Unit, WHO Bangladesh	Email:	mahmuds@who.int
For the purpose of:	Technical supervision and instructions - Reporting		
Administrative Officer:	Mr Thinlay Dorji Administrative Officer, WHO Bangladesh	Email:	dorjit@who.int
For the purpose of:	Contractual and financial management of the contract		

8. Characteristics of the Provider

The Requesting Unit may want to select a supplier with specific skills and competencies to capture expertise and knowledge (level of experience, experience in a specific technical or geographical area, working language, status, accreditations, logistical capacity, staffing, etc.).

1. Registered as Supplier with Government entity in Bangladesh
2. Total minimum 5 years' experience in the relevant field
3. Minimum average yearly turnover (sale) is BDT 2,000,000 for last 2 years
4. Compliant with the Tax and VAT rules by fulfilling bidder's obligations to pay taxes and VAT under the relevant
5. National regulations of the Country in operating its business



6. No pending Criminal/Civil lawsuits against the bidder's company/firm
7. The bidder's company/firm is not declared "Bankrupt/Ineligible/Banned" by any of the court in the country
8. Capable to implement the desired work/projects in specified location (project sites) utilizing own existing administrative, operational and logistical resources. THE WORLD HEALTH ORGANIZATION (WHO) DOES NOT ENTERTAIN ANY OVERHEAD/ADMINISTRATIVE COSTS WHATSOEVER OF THE BIDDERS FOR THE IMPLEMENTATION OF PROPOSED TECHNICAL WORK. THEREFORE, NO SUCH OVERHEAD/ADMINISTRATIVE COSTS SHOULD BE INCLUDED IN THE BIDS.
9. Possesses the required administrative and technical manpower to implement the project

9. Place of assignment

DHAKA AND DIFFERENT DISTRICTS OF BANGLADESH



Annex 2: Confidentiality Undertaking

1. The World Health Organization (WHO), acting through its Department of WHO Bangladesh, has access to certain information relating to TOPIC which it considers to be proprietary to itself or to entities collaborating with it (hereinafter referred to as "the Information").
2. WHO is willing to provide the Information to the Undersigned for the purpose of allowing the Undersigned to prepare a response to the Request for Proposal (RFP) for "**Climate Informed Hospital Emergency Preparedness and Response Plan**" ("the Purpose"), provided that the Undersigned undertakes to treat the Information as confidential and proprietary, to use the Information only for the aforesaid Purpose and to disclose it only to persons who have a need to know for the Purpose and are bound by like obligations of confidentiality and non-use as are contained in this Undertaking.
3. The Undersigned undertakes to regard the Information as confidential and proprietary to WHO or parties collaborating with WHO, and agrees to take all reasonable measures to ensure that the Information is not used, disclosed or copied, in whole or in part, other than as provided in paragraph 2 above, except that the Undersigned shall not be bound by any such obligations if the Undersigned is clearly able to demonstrate that the Information:
 1. was known to the Undersigned prior to any disclosure by WHO to the Undersigned (as evidenced by written records or other competent proof);
 2. was in the public domain at the time of disclosure by or for WHO to the Undersigned;
 3. becomes part of the public domain through no fault of the Undersigned; or
 4. becomes available to the Undersigned from a third party not in breach of any legal obligations of confidentiality (as evidenced by written records or other competent proof).
5. The Undersigned further undertakes not to use the Information for any benefit, gain or advantage, including but not limited to trading or having others trading in securities on the Undersigned's behalf, giving trading advice or providing Information to third parties for trade in securities.
6. At WHO's request, the Undersigned shall promptly return any and all copies of the Information to WHO.
7. The obligations of the Undersigned shall be of indefinite duration and shall not cease on termination of the above mentioned RFP process.
8. Any dispute arising from or relating to this Undertaking, including its validity, interpretation, or application shall, unless amicably settled, be subject to conciliation. In the event of the dispute is not resolved by conciliation within thirty (30) days, the dispute shall be settled by arbitration. The arbitration shall be conducted in accordance with the modalities to be agreed upon by the Undersigned and WHO or, in the absence of agreement within thirty (30) days of written communication of the intent to commence arbitration, with the rules of arbitration of the International Chamber of Commerce. The Undersigned and WHO shall accept the arbitral award as final.
9. Nothing in this Undertaking, and no disclosure of Information to the Undersigned pursuant to its terms, shall constitute, or be deemed to constitute, a waiver of any of the privileges and immunities enjoyed by WHO under national or international law, or as submitting WHO to any national court jurisdiction.

Acknowledged and Agreed:

Entity Name:
Mailing Address:
Name and Title of duly authorized representative:
Signature:
Date:



Country/Unit Name BAN PHE/WCO BAN

Annex 3: Vendor Information Form**Company Information to be provided by the Vendor submitting the proposal****UNGM Vendor ID Number:***If available – Refer to WHO website for registration process****Legal Company Name:***(Not trade name or DBA name)***Company Contact:****Address:****City:****State:****Country:****Zip:****Telephone Number:****Fax Number:****Email Address:****Company Website:****Corporate information:****Company mission statement****Service commitment to**
customers and measurements
used
*(if available)***Organization structure** (include
description of those parts of your
organization that would be involved in
the performance of the work)**Relevant experience** (how could
your expertise contribute to WHO's
needs for the purpose of this RFP) –
*Please attach reference and contact
details***Staffing information*** <http://www.who.int/about/finances-accountability/procurement/en/>



Annex 4: Contractual Provisions

Within 30 days of receipt of the contract between WHO and the successful bidder (the "Contract"), the successful bidder shall sign and date the Contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the Contract terms without changes, then WHO has the right not to proceed with the selected bidder and instead contract with another bidder of its choice. The Contract will include, without limitation, the provisions set forth below (with the successful bidder referred to below as the "Contractor"):

1. **Compliance with WHO Codes and Policies.** By entering into the Contract, the Contractor acknowledges that it has read, and hereby accepts and agrees to comply with, the WHO Policies (as defined below). In connection with the foregoing, the Contractor shall take appropriate measures to prevent and respond to any violations of the standards of conduct, as described in the WHO Policies, by its employees and any other persons engaged by the Contractor to perform any services under the Contract.

Without limiting the foregoing, the Contractor shall promptly report to WHO, in accordance with the terms of the applicable WHO Policies, any actual or suspected violations of any WHO Policies of which the Contractor becomes aware.

For purposes of the Contract, the term "WHO Policies" means collectively: (i) the WHO Code of Ethics and Professional Conduct; (ii) the WHO Policy on Sexual Exploitation and Abuse Prevention and Response; (iii) the WHO Policy on Preventing and Addressing Abusive Conduct; (iv) the WHO Code of Conduct for responsible Research; (v) the WHO Policy on Whistleblowing and Protection Against Retaliation; and (vi) the UN Supplier Code of Conduct, in each case, as amended from time to time and which are publicly available on the WHO website at the following links: <http://www.who.int/about/finances-accountability/procurement/en/> for the UN Supplier Code of Conduct and at <http://www.who.int/about/ethics/en/> for the other WHO Policies.

2. **Zero tolerance for sexual exploitation and abuse, sexual harassment and other types of abusive conduct.** WHO has zero tolerance towards sexual exploitation and abuse, sexual harassment and other types of abusive conduct. In this regard, and without limiting any other provisions contained herein:

(i) each legal entity Contractor warrants that it will: (i) take all reasonable and appropriate measures to prevent sexual exploitation or abuse as described in the WHO Policy on Sexual Exploitation and Abuse Prevention and Response, and/or sexual harassment and other types of abusive conduct as described in the WHO Policy on Preventing and Addressing Abusive Conduct by any of its employees and any other persons engaged by it to perform the work under the Contract; and (ii) promptly report to WHO and respond to, in accordance with the terms of the respective Policies, any actual or suspected violations of either Policy of which the Contractor becomes aware; and

(ii) each individual Contractor warrants that he/she will (i) not engage in any conduct that would constitute sexual exploitation or abuse as described in the WHO Policy on Sexual Exploitation and Abuse Prevention and Response, and/or sexual harassment and other types of abusive conduct as described in the WHO Policy on Preventing and Addressing Abusive Conduct. Without limiting the foregoing, the individual Contractor shall promptly report to WHO, in accordance with the terms of the respective Policies, any actual or suspected violations of either Policy of which the individual Contractor becomes aware.

3. **Tobacco/Arms Related Disclosure Statement.** The Contractor may be required to disclose relationships it may have with the tobacco and/or arms industry through completion of the WHO Tobacco/Arms Disclosure Statement. In the event WHO requires completion of this Statement, the Contractor undertakes not



to permit work on the Contract to commence, until WHO has assessed the disclosed information and confirmed to the Contractor in writing that the work can commence.

4. **Anti-Terrorism and UN Sanctions; Fraud and Corruption.** The Contractor warrants for the entire duration of the Contract that:

- i. it is not and will not be involved in, or associated with, any person or entity associated with terrorism, as designated by any UN Security Council sanctions regime, that it will not make any payment or provide any other support to any such person or entity and that it will not enter into any employment or subcontracting relationship with any such person or entity;
- ii. it shall not engage in any illegal, corrupt, fraudulent, collusive or coercive practices (including bribery, theft and other misuse of funds) in connection with the execution of the Contract; and
- iii. the Contractor shall take all necessary precautions to prevent the financing of terrorism and/or any illegal corrupt, fraudulent, collusive or coercive practices (including bribery, theft and other misuse of funds) in connection with the execution of the Contract.

Any payments used by the Contractor for the promotion of any terrorist activity or any illegal, corrupt, fraudulent, collusive or coercive practice shall be repaid to WHO without delay.

5. **Breach of essential terms.** The Contractor acknowledges and agrees that each of the provisions of paragraphs 1, 2, 3 and 4 above constitutes an essential term of the Contract, and that in case of breach of any of these provisions, WHO may, in its sole discretion, decide to:

- i. terminate the Contract, and/or any other contract concluded by WHO with the Contractor, immediately upon written notice to the Contractor, without any liability for termination charges or any other liability of any kind; and/or
- ii. exclude the Contractor from participating in any ongoing or future tenders and/or entering into any future contractual or collaborative relationships with WHO.

WHO shall be entitled to report any violation of such provisions to WHO's governing bodies, other UN agencies, and/or donors.

6. **Use of WHO Name and Emblem.** Without WHO's prior written approval, the Contractor shall not, in any statement or material of an advertising or promotional nature, refer to the Contract or the Contractor's relationship with WHO, or otherwise use the name (or any abbreviation thereof) and/or emblem of the World Health Organization.

7. **Assurances regarding procurement.** If the option for payment of a maximum amount applies, to the extent the Contractor is required to purchase any goods and/or services in connection with its performance of the Contract, the Contractor shall ensure that such goods and/or services shall be procured in accordance with the principle of best value for money. "Best value for money" means the responsive offer that is the best combination of technical specifications, quality and price.

8. **Audit.** WHO may request a financial and operational review or audit of the work performed under the Contract, to be conducted by WHO and/or parties authorized by WHO, and the Contractor undertakes to facilitate such review or audit. This review or audit may be carried out at any time during the implementation



of the work performed under the Contract, or within five years of completion of the work. In order to facilitate such financial and operational review or audit, the Contractor shall keep accurate and systematic accounts and records in respect of the work performed under the Contract.

The Contractor shall make available, without restriction, to WHO and/or parties authorized by WHO:

- i. the Contractor's books, records and systems (including all relevant financial and operational information) relating to the Contract; and
- ii. reasonable access to the Contractor's premises and personnel.

The Contractor shall provide satisfactory explanations to all queries arising in connection with the aforementioned audit and access rights.

WHO may request the Contractor to provide complementary information about the work performed under the Contract that is reasonably available, including the findings and results of an audit (internal or external) conducted by the Contractor and related to the work performed under the Contract.

9. **Publication of Contract.** Subject to considerations of confidentiality, WHO may acknowledge the existence of the Contract to the public and publish and/or otherwise publicly disclose the Contractor's name and country of incorporation, general information with respect to the work described herein and the Contract value. Such disclosure will be made in accordance with WHO's Information Disclosure Policy and shall be consistent with the terms of the Contract.

**Annex-5 : Detailed evaluation criteria**

Technical Evaluation and selection criteria guidelines and matrix of Proposals

-Two-stage procedure will be followed in evaluating the proposals, with technical evaluation of the proposal being completed prior to any focus on or comparison of prices.

-The Technical proposal will be opened initially and the bids which passed preliminary examination/scrutiny process in the light of instructions to bidders will be evaluated by the concerned teams of WHO.

-During the technical evaluation process, financial envelopes will remain sealed/unopen. The financial bids of the successful bidders, whose proposal are compliant in terms of the requirements of the bid, will be considered eligible for financial evaluation.

WHO shall determine the Legal Capacity and Eligibility for the Medial Monitoring Work on "PASS/FAIL (YES/NO)" basis as per the qualification criteria detailed under table below.

If bidder(s) fails to pass the following qualification questions, they will not be considered for next step e.g. evaluation of bids/quotations as per the detailed weighted evaluation criteria and scoring matrix stage

"PASS/FAIL (YES/NO)" – Questions

Requirement	Qualification Criteria	Supporting Documents to be provided by the bidder	YES/NO
Registered as Supplier with Government entity in Bangladesh	Legal entity of the bidder	a. Copies of up to date Trade license/certificate of incorporation/registration with NGO Affairs Bureau or BIDA etc.	
Past performance of the bidder with WHO is satisfactory and without any internal limitation/restrictions for future contracts by WHO (applicable only for bidders who is performing or had performed for WHO under contract with WHO Bangladesh).	Eligibility of the bidder	a. internal review report.	
Total minimum 5 years' experience in the relevant field	Total relevant Experience	a. Work completion certificate from any procurement entity to prove the experiences	
Legally entitled to operate its business in the country complying with the government tax/vat rules/regulation	TAX/VAT obligations	VAT registration and TIN certificate	
The bidder has met the requirements of self-declarations applicable to private and public companies: - No pending Criminal/Civil lawsuits against the bidder's company/firm -The bidder's company/firm is not declared "Bankrupt/Ineligible/Banned" by any of the court in the country - There is no pending major lawsuits and litigations against the bidder's company/firm	Eligibility of the Bidder	Signed Self Declaration Signed Statement of Conformity	



Requirement	Qualification Criteria	Supporting Documents to be provided by the bidder	YES/NO
<p>in excess of USD 100,000 at risk (indicate particularly those by licensees or patent infringement) against the Institution/company.</p> <p>- The bidder's company/firm has not received any sanctioned by any UN Agencies, World Bank/ADB or diplomatic missions in the Country</p>			

Minimum Eligibility Criteria for the Key personnel:

-Technical Evaluation and selection guidelines and matrix of Proposals:

Bidders are required to read the specification, requirements, specific quality questions, and selection criteria, weighted methodology, evaluation criteria, scoring and prices schedule/template, as outlined in this RFP document in order to submit a substantial/complete bid. Your bid submission with required information, proof and supporting documents/evidence are expected to provide WHO the details of the information WHO requires and ultimately, contribute to assess/carry out proper evaluation of your capability in providing the required services. The basics of the evaluation and awarding processes are provided below:

i. Award, Scoring and Weightage System/Methodology:

- The bid of "the highest overall Technical and Financial scores" of **1,000 points will be awarded**;
- Score/Point distributed as per the Weighting matrix in Part iv in this RFP: 700 points for Technical Proposal and 300 points for the Financial Proposal.**
- A minimum of 70% (490 out of 700) is required to be considered technically qualified for this work.**

ii. Technical Scoring and Weighting System:

The weight/weighted scale as provided below under iii, weighted evaluation criteria and points/scores for each criterion/sub-criterion under Technical Evaluation with total points (700) are provided below under iv:

iii. Scoring Methodology – Overall (for scoring where specific criteria is not given)

Scoring Methodology - Overall

0	Non-compliant, fails to satisfy specified requirements.
40%	Barely acceptable evidence of ability to support contract requirements
70%	Satisfactory evidence of ability to support contract requirements
90%	Good evidence of ability to exceed contract requirements
100%	Excellent evidence of ability to exceed contract requirements

iv. Detail Evaluation Criteria of each of the three categories are as below:

(Information of all the evaluation criteria need to clearly presented in the proposal)

A. Expertise of the Firm/Organization: 100 points



A.1	General Organizational Capability/strength: 20 points <ul style="list-style-type: none"> Management structure of the firm (Organizational organogram): 5 Size of the firm, reputation and client based, achievements (total employment, geographical distribution of the headquarters, field offices in respect of activities/operations in the country): 10 Established policy, manual and financial/administrative rules in place (HR and Financial manual):5
A.2	Relevant background: 40 points (Number of emergency and disaster related projects and programmes implemented in past ten years (2011-2021). (Scanned copy of the verifying documents, e.g., contract agreement/project completion certificate need to be attached). <ul style="list-style-type: none"> ≥ 5 projects/programmes implemented: 40 points 4 projects/programmes implemented: 36 points 3 projects/programmes implemented: 28 points 2 projects/programmes implemented: 16 points 1 project/programme implemented: 04 points < 1 project/programme implemented: 0 points
A.3	Financial size of the Emergency and Disaster Management related projects/ programmes: 40 points Financial size of the emergency and disaster related projects and programmes implemented in past ten years (2011-2021). <ul style="list-style-type: none"> BDT 4 million and above: 40 points BDT 3 million: 36 points BDT 2 million: 28 points BDT 1 million: 16 points BDT < 1 million: 0 points

B. Proposed Methodology, and Implementation Plan: 300 points

B.1	Understanding of the assignment, (must include background, rationale, objective, scope of work, and expected output i.e., the level of understanding on the project requirements as outlined under the RFP): 100 points
B.2	The work methodology (must include activity design, method, data collection tools, data analysis methods, limitations, and ethical consideration): 120 points
B.3	The Implementation plan (must include task's description, roles and responsibilities of key personnel, work schedule, risks associated and minimization, communication plan): 80 points

C. Management Structure and Key Personnel: 300 points

C1	Team Leader and Emergency Preparedness Expert 175 points (Details of each of the evaluation criteria need to be presented in the CV under separate sections) <ul style="list-style-type: none"> - Educational Background: 55 points <ul style="list-style-type: none"> MPH with MBBS major in Epidemiology: 55 points MBBS: 38.5 points Others: 0 points
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	- Number of years of experience in Health emergency and disaster related projects: 60 points <ul style="list-style-type: none"> ○ 5 years: 60 points ○ 4 years: 54 points ○ 3 years: 42 points ○ 2 years: 24 points ○ 1 year : 06 points ○ <1 year: 0 points
	- Number health emergency preparedness and response plan developed: 60 points <ul style="list-style-type: none"> ○ ≥ 3 Plans: 60 points ○ 2 Plans: 42 points ○ 1 Plan: 16 points ○ <1 Plan: 0 points
C.2	Climate Change & Health Expert: 125 points (Details of each of the evaluation criteria need to be presented in the CV under separate sections)
	- Educational Background: 30 points <ul style="list-style-type: none"> ○ Master's in public health (epidemiology): 30 points ○ MBBS: 21 points ○ Others: 0 points
	- Years of working experience in climate change and health related projects/programs/assignments/research: 60 points <ul style="list-style-type: none"> ○ 5 years: 60 points ○ 4 years: 54 points ○ 3 years: 42 points ○ 2 years: 24 points ○ 1 years: 06 points ○ <1 Year: 0 points
	- Number of epidemiological assessments on climate change and health conducted: 35 points <ul style="list-style-type: none"> ○ 5 assessments: 35 points ○ 4 assessments: 31.5 points ○ 3 assessments: 24.5 points ○ 2 assessments: 14 points ○ 1 assessments: 3.5 points ○ <1 assessment: 0 points

Financial Evaluation

During the Financial Evaluation, the price proposal of all bidders who have passed the Technical Evaluation will be compared, according to the following scoring and weighting system.

Financial Scoring and Weighting System:

All technical qualified proposals will be scored out of 300 based on the formula provided below. The maximum points (300) will be assigned to the lowest financial proposal. All other proposals received points according to the following formula:

$$p = y (\mu/z)$$

Where:

p = points for the financial proposal being evaluated

y = maximum number of points for the financial proposal

μ = price of the lowest priced proposal

z = price of the proposal being evaluated

**Annex: 6- Financial Proposal Template (please submit it in separate sealed envelope)**

The financial proposal must include breakdown of overall price in BDT as given in the example below.

Breakdown of Overall Price (in BDT)					
#	Task	Role	Day Rate	Proposed days of work	Total Cost
1.	Expert Services costs including key expert and other related staff to be engaged for the work				
2.	Field work related expenses (e.g. Travel cost for field Visit etc.)				
3.	Project related Expenses (Data collection, analysis, planning, consultative and dissemination meetings, workshops, trainings, report preparation etc.)				
4.	Other costs if any (Please specify)				
	Total Cost				

In Word:

Important Note:

THE WORLD HEALTH ORGANIZATION (WHO) DOES NOT ENTERTAIN ANY OVERHEAD/ ADMINISTRATIVE COSTS WHATSOEVER OF THE BIDDERS FOR THE IMPLEMENTATION OF PROPOSED TECHNICAL WORK. THEREFORE, NO SUCH OVERHEAD/ ADMINISTRATIVE COSTS SHOULD BE INCLUDED IN THE BIDS.



Annex 7: Self Declaration Form

Applicable to private and public companies

<COMPANY> (the "Company") hereby declares to the World Health Organization (WHO) that:

1. it is not bankrupt or being wound up, having its affairs administered by the courts, has not entered into an arrangement with creditors, has not suspended business activities, is not the subject of proceedings concerning the foregoing matters, and is not in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
2. it is solvent and, in a position, to continue doing business for the period stipulated in the contract after contract signature, if awarded a contract by WHO;
3. it or persons having powers of representation, decision making or control over the Company have not been convicted of an offence concerning their professional conduct by a final judgment;
4. it or persons having powers of representation, decision making or control over the Company have not been the subject of a final judgment or of a final administrative decision for fraud, corruption, involvement in a criminal organization, money laundering, terrorist-related offences, child labour, human trafficking or any other illegal activity;
5. it is in compliance with all its obligations relating to the payment of social security contributions and the payment of taxes in accordance with the national legislation or regulations of the country in which the Company is established;
6. it is not subject to an administrative penalty for misrepresenting any information required as a condition of participation in a procurement procedure or failing to supply such information;
7. it has declared to WHO any circumstances that could give rise to a conflict of interest or potential conflict of interest in relation to the current procurement action;
8. it has not granted and will not grant, has not sought and will not seek, has not attempted and will not attempt to obtain, and has not accepted and will not accept any direct or indirect benefit (financial or otherwise) arising from a procurement contract or the award thereof;
9. it adheres to the UN Supplier Code of Conduct;
10. it has zero tolerance for sexual exploitation and abuse and has appropriate procedures in place to prevent and respond to sexual exploitation and abuse.

The Company understands that a false statement or failure to disclose any relevant information which may impact upon WHO's decision to award a contract may result in the disqualification of the Company from the bidding exercise and/or the withdrawal of any proposal of a contract with WHO. Furthermore, in case a contract has already been awarded, WHO shall be entitled to rescind the contract with immediate effect, in addition to any other remedies which WHO may have by contract or by law.

Entity Name:	
Mailing Address:	
Name and Title of duly authorized representative:	
Signature:	
Date:	



Country/Unit Name BAN PHE/WCO BAN

Date:

To

Administrative Officer

WHO Bangladesh

Statement of Conformity

1. No pending Criminal/Civil lawsuits against our company/firm.
2. Our company/firm is not declared "Bankrupt/Ineligible/Banned" by any of the court in the country.
3. There is no pending major lawsuits and litigations against our company/firm in excess of USD 100,000 at risk (indicate particularly those by licensees or patent infringement) against the Institution/company.
4. Our company/firm has not received any sanctioned by any UN Agencies, World Bank/ADB or diplomatic missions in the Country.

Signature

Name of the Company

Official Stamp