## ANNEX SER 2-2: Simple Procedure Request for Proposal

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| This note is for the Contracting Authority on how to complete this Request for Proposal: *Where you see <…> please enter information.*  *Options are marked* (Option:…)  *\*\*\*\**DELETE this Page prior to submitting the Request for PROPOSAL*\*\*\*\** |

**REQUEST FOR PROPOSAL**

TO:

|  |  |  |  |
| --- | --- | --- | --- |
| <Name and address> |  | **Date of issue:** | <Date> |
|  | **Contract Title** | <Contract Title> |
|  | **PR Reference:** | <RE Ref> |
|  | **Closing date:** | <Date> |
|  | **For further information, please contact the Contracting Authority:** | <Contracting authority>  Contact person: <Name>  Tel: <Number>  E-mail: <Email> |
|  |  | **Please note that the Proposal may be sent by <post, email or delivered by hand>.** | |

**<Name of Contracting Authority, country> invites you to submit a PROPOSAL for the following SERVICES in the below table**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Description** | **Unit** | **Qty** | **Currency <type >** | | **Latest**  **Delivery date** |
| **Unit Price** | **Total Price** |
| 1 | <Description of services> |  | <qty> |  |  | <Date> |
| 2 | … |  | <qty> |  |  | <Date> |
|  | <Add extra lines as necessary> |  |  |  |  |  |
|  | **Total price for all items** | | | |  |  |
|  | **Delivery** | | | |  |  |
|  | **Value added tax (VAT)** | | | |  |  |
|  | **Total price incl. VAT and Delivery** | | | |  |  |
|  | **Validity of quotation <min 30 days>** | | | |  |  |

Option: Insert ToR or additional documentation or technical specifications as required.

Any subsequent procurement related to this Request for Proposal will be subject to the Contracting Authorities General Terms and Conditions for Service Contracts and the Code of Conduct for Contractors available through the below link. Printed versions are available on request.

<https://www.kirkensnodhjelp.no/en/about-nca/for-contractors/>

Signature and stamp:

Signed by:

|  |  |
| --- | --- |
| **The Contractor** |  |
| Name of the company |  |
| Address |  |
| Telephone no. |  |
| E-mail: |  |
| Name of contact person |  |
| Date: |  |