

REQUEST FOR QUOTATION (RFQ)

RFQ Reference: **4200606956**

Date: 12 January 2024

SECTION 1: REQUEST FOR QUOTATION (RFQ) for the Rehabilitation of 13 Water Wells at Al Byda Municipality

International Organisation for Migration (IOM) kindly requests your quotation for the provision of goods, works and/or services as detailed in Annex 1 of this RFQ.

This Request for Quotation comprises the following documents:

Section 1: This request letter.

Section 2: RFQ Instructions and Data

Annex 1: Quotation Submission Form

Annex 2: Technical and Financial Offer

Annex 3: Schedule of Requirements

Annex A: Bills of Quantity (BOQ)

When preparing your quotation, please be guided by the RFQ Instructions and Data. Please note that quotations must be submitted using **Annex 1: Quotation Submission Form and Annex 2 Technical and Financial Offer**, by the method and by the date and time indicated. It is your responsibility to ensure that your quotation is submitted on or before the deadline. Quotations received after the submission deadline, for whatever reason, will not be considered for evaluation.

Mandatory Site Visit on: Wednesday, 22 January 2024 at 10:00 AM. The site visit is mandatory and failure to attend will lead to automatic disqualification of the bidders.

For disqualification and for any technical queries, please get in touch with Engineer:

1- KEZEIRI Khalil , Mobile Phone: 0917016506

Thank you and we look forward to receiving your quotations.

IOM Libya Supply Chain

SECTION 2: RFQ INSTRUCTIONS AND DATA

| | |
|--|---|
| Deadline for the Submission of Quotation | 03 February 2024 If any doubt exists as to the time zone in which the quotation should be submitted, refer to http://www.timeanddate.com/worldclock/ . |
| Method of Submission | <p>Quotations must be submitted as follows:</p> <p><input type="checkbox"/> E-tendering <input checked="" type="checkbox"/> Email <input type="checkbox"/> Courier / Hand delivery <input type="checkbox"/> Other Click or tap here to enter text.</p> <p>Bid submission address: iomlibyaproposal@iom.int</p> <ul style="list-style-type: none"> ▪ File Format: PDF ▪ File names must be maximum 60 characters long and must not contain any letter or special character other than from Latin alphabet/keyboard. ▪ All files must be free of viruses and not corrupted. ▪ Max. File Size per transmission: Click or tap here to enter text. ▪ Mandatory subject of email: Company name and RFQ 4200606956 ▪ Multiple emails must be clearly identified by indicating in the subject line “email no. X of Y”, and the final “email no. Y of Y”. ▪ It is recommended that the entire Quotation be consolidated into as few attachments as possible. |
| Cost of preparation of quotation | IOM shall not be responsible for any costs associated with a Supplier’s preparation and submission of a quotation, regardless of the outcome or the manner of conducting the selection process. |
| Supplier Code of Conduct | All prospective suppliers must read the UN Supplier Code of Conduct and acknowledge that it provides the minimum standards expected of suppliers to the UN. The Code of Conduct, which includes principles on labour, human rights, environment and ethical conduct may be found at: Supplier Code of Conduct (ungm.org) . |
| Conflict of Interest | UN encourages every prospective Supplier to avoid and prevent conflicts of interest, by disclosing to UN if you, or any of your affiliates or personnel, were involved in the preparation of the requirements, design, specifications, cost estimates, and other information used in this RFQ. |
| General Conditions of Contract | Any Purchase Order or contract that will be issued as a result of this RFQ shall be subject to the IOM General Conditions of Contract for provision of goods/services/transportation/medical services available at https://www.iom.int/do-business-us-procurement . |
| Eligibility | <p>-Bidders shall have the legal capacity to enter into a binding contract with IOM and to deliver in the country, or through an authorized representative.</p> <p>-Bidders shall be certified for provision of service category requested in this RFQ.</p> |
| Currency of Quotation | Quotations shall be quoted in USD Currency |
| Duties and taxes | <p>The International Organization for Migration is exempt from all direct taxes, except charges for public utility services, and is exempt from customs restrictions, duties, and charges of a similar nature in respect of articles imported or exported for its official use. All quotations shall be submitted net of any direct taxes and any other taxes and duties, unless otherwise specified below:</p> <p>All prices shall:</p> <p><input type="checkbox"/> be inclusive of VAT and other applicable indirect taxes <input checked="" type="checkbox"/> be exclusive of VAT and other applicable indirect taxes</p> |
| Language of quotation and documentation including | English |

| | |
|--|---|
| catalogues, instructions and operating manuals | |
| Documents to be submitted | Bidders shall include the following documents in their quotation: <input checked="" type="checkbox"/> Annex 1: Quotation Submission Form duly completed and signed. <input checked="" type="checkbox"/> Annex 2: Technical and Financial Offer with ANNEX A, duly completed and signed and in accordance with the Schedule of Requirements in Annex 2 |
| Quotation validity period | Quotations shall remain valid for 90 Days from the deadline for the Submission of Quotation. |
| Price variation | No price variation due to escalation, inflation, fluctuation in exchange rates, or any other market factors shall be accepted at any time during the validity of the quotation after the quotation has been received. |
| Partial Quotes | <input checked="" type="checkbox"/> Not permitted |
| Payment Terms | <input checked="" type="checkbox"/> 95% within 30 days after receipt of goods, works and/or services and submission of payment documentation. 5% of the agreement amount will be in hold for 3 months from works completion day. And will be released based on certificate of final completion of works (Retention period) <input type="checkbox"/> Other Click or tap here to enter text. |
| Contact Person for correspondence, notifications and clarifications | Focal Person: IOM Libya Procurement E-mail address: iomlibyaproposal@iom.int |
| Clarifications | Requests for clarification from bidders will not be accepted any later than 3 days before the submission deadline. Responses to request for clarification will be communicated iomlibyaproposal@iom.int by 31 January 2024 |
| Evaluation method | <input checked="" type="checkbox"/> Technical Evaluation method of PASS/FAIL for the company technical offer and documents requested in Annex 2 |
| Evaluation criteria | <input checked="" type="checkbox"/> Full compliance with all requirements as specified in Annex 2 <input checked="" type="checkbox"/> Full acceptance of the General Conditions of Contract <input checked="" type="checkbox"/> Comprehensiveness of after-sales services <input checked="" type="checkbox"/> Earliest Delivery /shortest lead time <input type="checkbox"/> Others (<i>for ex, environmental criteria/considerations, etc</i>) |
| Right not to accept any quotation | IOM is not bound to accept any quotation, nor award a contract or Purchase Order |
| Right to vary requirement at time of award | At the time of award of Contract or Purchase Order, IOM reserves the right to vary (increase or decrease) the quantity of services and/or goods, by up to a maximum 25% of the total offer, without any change in the unit price or other terms and conditions. |
| Type of Contract to be awarded | Service Agreement |
| Expected date for contract award. | 25 February 2024 |
| Policies and procedures | This RFQ is conducted in accordance with Policies and Procedures of IOM |
| UNGM registration | IOM is encouraging all suppliers to register at the United Nations Global Marketplace (UNGM) website at www.ungm.org . The Bidder may still submit a quotation even if not registered with the UNGM, however, if the Bidder is selected for Contract award of USD 100,000 and above, the Bidder is recommended to register on the UNGM prior to contract signature. For vendors who do not have the technical means to register in UNGM, the UNGM has implemented an assisted vendor registration functionality that allows IOM procurement personnel to add local vendors to the UNGM. |

ANNEX 1: QUOTATION SUBMISSION FORM

Bidders are requested to complete this form, including the Company Profile and Bidder's Declaration, sign it and return it as part of their quotation along with Annex 3: Technical and Financial Offer. The Bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

| | | |
|-----------------|----------------------------------|-------------------------------------|
| Name of Bidder: | Click or tap here to enter text. | |
| RFQ reference: | 4200606956 | Date: Click or tap to enter a date. |

BIDDER'S DECLARATION OF CONFORMITY¹

| Yes | No | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I hereby represent and warrant that neither the Supplier, nor any person having powers of representation, decision-making or control over it or any member of its administrative, management or supervisory body, has been the subject of a final judgement or final administrative decision for one of the following reasons: bankruptcy, insolvency or winding-up procedures; breach of obligations relating to the payment of taxes or social security contributions; grave professional misconduct, including misrepresentation, fraud; corruption; conduct related to a criminal organisation; money laundering or terrorist financing; terrorist offences or offences linked to terrorist activities; child labour and other trafficking in human beings, any discriminatory or exploitative practice, or any practice that is inconsistent with the rights set forth in the Convention on the Rights of the Child or other prohibited practices; irregularity; creating or being a shell company. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier is financially sound and duly licensed. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier has adequate human resources, equipment, competence, expertise and skills necessary to complete the contract fully and satisfactorily, within the stipulated completion period and in accordance with the relevant terms and conditions. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier complies with all applicable laws, ordinances, rules and regulations. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier will in all circumstances act in the best interests of IOM. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that no official of IOM or any third party has received from, will be offered by, or will receive from the Supplier any direct or indirect benefit arising from the contract. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier has not misrepresented or concealed any material facts during the contracting process. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier will respect the legal status, privileges and immunities of IOM as an intergovernmental organization. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that neither the Supplier nor any persons having powers of representation, decision-making or control over the Supplier or any member of its administrative, management or supervisory body are included in the most recent Consolidated United Nations Security Council Sanctions List (the "UN Sanctions List") or are the subject of any sanctions or |

¹ This form is mandatory to fill in and sign by every vendor who submits quotation

| Yes | No | |
|--------------------------|--------------------------|--|
| | | other temporary suspension. The Supplier will immediately disclose to IOM if it or they become subject to any sanction or temporary suspension. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier does not employ, provide resources to, support, contract or otherwise deal with any person, entity or other group associated with terrorism as per the UN Sanctions List and any other applicable anti-terrorism legislation. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that, the Supplier will apply the highest ethical standards, the principles of efficiency and economy, equal opportunity, open competition and transparency, and will avoid any conflict of interest. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I further represent and warrant that the Supplier undertakes to comply with the Code of Conduct, available at https://www.ungm.org/Public/CodeOfConduct . |
| <input type="checkbox"/> | <input type="checkbox"/> | It is the responsibility of the Supplier to inform IOM immediately of any change to the information provided in this Declaration. |
| <input type="checkbox"/> | <input type="checkbox"/> | On behalf of the Supplier, I certify that I am duly authorized to sign this Declaration and on behalf of the Supplier I agree to abide by the terms of this Declaration for the duration of any contract entered into between the Supplier and IOM. |
| <input type="checkbox"/> | <input type="checkbox"/> | IOM reserves the right to terminate any contract between IOM and the Supplier, with immediate effect and without liability, in the event of any misrepresentation made by the Supplier in this Declaration. |

Signature: _____

Name: [Click or tap here to enter text.](#)

Title: [Click or tap here to enter text.](#)

Date: [Click or tap to enter a date.](#)

VENDOR INFORMATION SHEET

Vendor No. _____
Internal to IOM

Registered Vendor Name* _____

Other Names/Acronyms _____

Address* _____

House No _____

Street Name _____

ZIP/Postal Code* _____

City* _____

Region* _____

Country* _____

Contact Information

Company Tel/Mobile: _____ Contact Person: _____

Company Email: _____ Contact Person Position: _____

Company Website: _____

- Industry Category*:**
- 0100 - Commercial Vendors
 - 0200 - National CSOs
 - 0300 - National Government Entities
 - 0400 - International CSOs

- 0500 - International Organizations - Non-UN
- 0600 - UN entities
- 0005 - Individual Consultant/Non-Staff

- Business Type*:**
- Direct Producer/Manufacturing
 - Reseller/Distributor/Service Provider

Provide Services/Goods Internationally* Yes No

Disability-inclusive* Yes Not applicable

Women-owned/controlled*

- At least 51% women-owned/controlled
- Less than 51% women-owned/controlled
- Not applicable

Notes

All fields marked with * are mandatory.
The form may be returned if mandatory fields are missing/incorrect or in the wrong format (esp. Zipcode).

Vendor Name - should match IDs or registration documents.

If there is insufficient space, please use the **Other Information section**

Product Categories (check all applicable)*

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Agriculture, Livestock and Fisheries <input type="checkbox"/> Chemicals <input type="checkbox"/> Clothing and Luggage <input type="checkbox"/> Construction <input type="checkbox"/> Consultancy and Contracted Services <input type="checkbox"/> Finance and Administration <input type="checkbox"/> Food and Beverage | <input type="checkbox"/> Fuels and Derivatives <input type="checkbox"/> Furniture <input type="checkbox"/> Hospitality, Events <input type="checkbox"/> Insurances <input type="checkbox"/> IT and Communications <input type="checkbox"/> Land and Buildings <input type="checkbox"/> Learning, Training and Recreation | <input type="checkbox"/> Legal and Investigation <input type="checkbox"/> Logistics and Warehousing <input type="checkbox"/> Media and Printing <input type="checkbox"/> Medical, Drugs and Pharma <input type="checkbox"/> NFIs – Household and Camps <input type="checkbox"/> Office Equipment and Supply <input type="checkbox"/> Personal Care | <input type="checkbox"/> Power Supply and Electric <input type="checkbox"/> Quality Control and Environment <input type="checkbox"/> Security <input type="checkbox"/> Social and Humanitarian Services <input type="checkbox"/> Tickets <input type="checkbox"/> Tools and Machinery <input type="checkbox"/> Vehicles and Accessories |
|--|--|--|---|

UNGM No. _____ <https://www.ungm.org/UNUser/Home>

UN Partner Portal Reference _____ <https://www.unpartnerportal.org>

Registration Date _____ *Main Country of Operations (dd-mmm-yyyy)*

Licensing Auth./Type _____ **License No.:** _____ **Reg. Date:** _____ **Expiry Date:** _____
For additional licenses, please use the Other Information Section *dd-mmm-yyyy* *dd-mmm-yyyy*

Partner Entities (indicate if there are other relevant business partner accounts already registered in IOM. *Format: Account Number-Name*)

Same entity registered in another office _____

Parent company _____

Subsidiaries/Branches _____

Other Information:

Section II: Payment and Banking Information

Payment Details

Payment Method* Bank Transfer Check** Cash** Others** _____

Justification for Non-Bank Payment Method** _____

Notes

Payment currency of the vendor **MUST** be clearly marked in order to avoid additional bank charges and/or delay in payments.
 Non-bank payment methods require justification.

Bank Details (mandatory if Payment Method is via Bank Transfer):

Bank Name _____
 Bldg and Street _____
 City _____
 Postal Code _____
 Country _____
 Bank Account Name _____
 Bank Keys _____
 Account Currency _____
 Bank Account No. _____
 *Depending on the country _____
 Swift Code/BIC (accounts outside U.S.A.) _____
 IBAN Number (mandatory for banks in Europe) _____
 Clearing No. (CHF accounts in Switzerland) _____
 ABA No. for ACH (USD accounts in U.S.A.) _____
 Bank Branch Code _____

Notes

If there are multiple bank accounts, please add an extra sheet, and mark the default bank account.

If awarded, please submit ID/Registration, signed IOM Supplier Code of Conduct and Proof of Banking Details to IOM

I hereby certify that the information above are true and correct. I am also authorizing IOM to validate all claims with concerned authorities.

 Printed Name

 Signature

 Position/Title

 Date

ANNEX 2: TECHNICAL AND FINANCIAL OFFER - SERVICES

Bidders are requested to complete this form, sign it and return it as part of their quotation along with Annex 2 Quotation Submission Form. The Bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

| | | |
|-----------------|----------------------------------|-------------------------------------|
| Name of Bidder: | Click or tap here to enter text. | |
| RFQ reference: | 4200606956 | Date: Click or tap to enter a date. |

Technical Offer

Provide the following:

- a brief description of your qualification, capacity and expertise that is relevant to the Terms of Reference.
- a brief methodology, approach and implementation plan;
- team composition and CVs of key personnel

Financial Offer

Provide a lump sum for the provision of the services stated in the Terms of Reference of your technical offer. The lump-sum should include all costs of preparing and delivering the Services. All daily rates shall be based on an eight-hour working day.

Currency of Quotation: USD

| Ref | Description of Deliverables | Price |
|--------------------|--|-------|
| 1. | Minor Rehabilitation of 13 Water Wells in Al-bayda Municipality Please see the detailed ANEEX A & ANNEX B (BOQ) | |
| Total Price | | |

Compliance with Requirements

| | You Responses | | |
|-----------------------------------|--------------------------|--------------------------|--|
| | Yes, we will comply | No, we cannot comply | If you cannot comply, pls. indicate counter proposal |
| Delivery Lead Time | <input type="checkbox"/> | <input type="checkbox"/> | Click or tap here to enter text. |
| Validity of Quotation | <input type="checkbox"/> | <input type="checkbox"/> | Click or tap here to enter text. |
| Payment terms | <input type="checkbox"/> | <input type="checkbox"/> | Click or tap here to enter text. |
| Other requirements [pls. specify] | <input type="checkbox"/> | <input type="checkbox"/> | Click or tap here to enter text. |

| | |
|--|---|
| I, the undersigned, certify that I am duly authorized to sign this quotation and bind the company below in event that the quotation is accepted. | |
| <p><i>Exact name and address of company</i></p> <p>Company Name: Click or tap here to enter text.</p> <p>Address: Click or tap here to enter text.</p> <p>Click or tap here to enter text.</p> <p>Phone No.: Click or tap here to enter text.</p> <p>Email Address: Click or tap here to enter text.</p> | <p>Authorized Signature:</p> <p>Date: Click or tap here to enter text.</p> <p>Name: Click or tap here to enter text.</p> <p>Functional Title of Authorised Signatory: Click or tap here to enter text.</p> <p>Email Address: Click or tap here to enter text.</p> |

ANNEX A_Bill of Quantities

| BILL OF QUANTITIES | | | | | | |
|--|---|-------------|--|---|---|-----|
| REHABILITATION OF 13 WATER WELLS AT THE MUNICIPALITY OF ALBYDA | | | | | | |
| Location: | المدينة بلدية البيضاء | | | | | |
| Coordinates | المنطقة البيضاء-مساحة-سيدي الحوري-موراوة | | | | | |
| | Item Description | QTY, الكمية | UNIT Price(\$) متر Material and Labours الوحدة | TOTAL Price السعر Labours الاجمالي | بيان الاصل | ر.م |
| 1 | Supply and installation of Submersible Water Pump (25HP) , Q=M3/H 14,00-34,00, Hmax=350meter automatic electrical switches) The input power is Three phase, 380 -415V, 50Hz at (2 pumps at Sidi Abd Al Wahed, Industrial Institute, Hassien Freij) | 4 | Pcs | | توريد وتركيب مضخة مياه غاطسة (25حصان) ، Q = M3 / H 14.00-34.00 ، Hmax = 253.00 متر محولات كهربائية أوتوماتيكية (أوتوماتيكية) طاقة الإمداد ثلاثية الأطوار(383فولت) ، 380 -415 فولت ، 50 هرتز (عدد2 مضخة في سيدي عبد الواحد في منطقة المعهد الصناعي ، حسن فرج) | 1 |
| 2 | Supply and installation of Submersible Water Pump (30HP) Q=M3/H 14,00-34,00, Hmax=400meter automatic electrical switches) The input power is Three phase, 380 -415V, 50Hz at (Al Haras Al Thouwri, Al Souque Al Gadim,Messa Area Abu Ghaffar,(Al Fath Mosque) Al Khanssa area, (Al Byda Medical Center , Known as AlThoura Hospital) | 5 | Pcs | | توريد وتركيب مضخة مياه غاطسة (30حصان) ، Q = M3 / H 14.00-34.00 ، Hmax = 400 متر محولات كهربائية أوتوماتيكية (أوتوماتيكية) طاقة الإمداد ثلاثية الأطوار(383فولت) ، 380 -415 فولت ، 50 هرتز (الحرس الثوري ، السوق القديم ،مسة أبو غففر ، مسجد الفتح في منطقة الخفساء، مستشفى الثوري) | 2 |
| 3 | Supply and installation of Submersible Water Pump (35HP)=M3/H 14,00-34,00,Hmax=400meter automatic electrical switches) The input power is Three phase, 380 -415V, 50Hz (Al Sahieheif Sidi Mohammed Al Hamri, Bilal Mosque) | 2 | Pcs | | توريد وتركيب مضخة مياه غاطسة (35حصان) ، Hmax = 400 متر محولات كهربائية أوتوماتيكية (أوتوماتيكية) طاقة الإمداد ثلاثية الأطوار(383فولت) ، 380 -415 فولت ، 50 هرتز (الصححيف في سيدي محمد الحوري ، مسجد بلال) | 3 |
| 4 | Supply and installation of Submersible Water Pump (40HP) , Q=M3/H 14,00-34,00, Hmax=400meter automatic electrical switches) The input power is Three phase, 380 -415V, 50Hz at (Marwa Area) | 1 | Pcs | | توريد وتركيب مضخة مياه غاطسة (40حصان) ، Q = M3 / H 14.00-34.00 ، Hmax = 400 متر محولات كهربائية أوتوماتيكية (أوتوماتيكية) طاقة الإمداد ثلاثية الأطوار(383فولت) ، 380 -415 فولت ، 50 هرتز (مراوة) | 4 |
| 5 | Supply and installation of electrical control panel for the well at town center | 1 | Pcs | | توريد وتركيب لوحة مفاتيح كهربائية للبر للبر الجوف في وسط البلاد | 5 |
| Sub-Total | | | | | | |
| TOTAL Materials - Labor and Delivery | | | | | القيمة الاجمالية | |
| Total COST in USD | | | | | | |
| NOTES/(In Arabic) | | | | | | |
| 1 | ALL THE CONSTRUCTION MATERIALS SHOULD BE BRAND NEW AND TESTED ACCORDING TO CONSTRUCTION WORKS SPECIFICATIONS BY TSE AND INSTRUCTION OF SITE ENGINEER. | | | | | |
| 2 | IN CASE OF ANY DIFFERENCE BETWEEN BOQ AND DESIGNS, THE INSTRUCTION OF SUPERVISOR/ENGINEER WILL PREVAIL. | | | | | |
| 3 | IN CASE OF ANY DIFFERENCE BETWEEN ENGLISH AND ARABIC TRANSLATION , ENGLISH WILL PREVAIL. | | | | | |